

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000112973

FILED  
Apr 18, 2008  
Secretary of State

Entity Name: POOL CAPTAIN CORP

**Current Principal Place of Business:**

4070 MONZA DRIVE  
NEW SMYRNA BEACH, FL 32168 US

**New Principal Place of Business:**

2830 OSPREY COVE DRIVE  
NEW SMYRNA BEACH, FL 32168 US

**Current Mailing Address:**

4070 MONZA DRIVE  
NEW SMYRNA BEACH, FL 32168 US

**New Mailing Address:**

2830 OSPREY COVE DRIVE  
NEW SMYRNA BEACH, FL 32168 US

FEI Number: 26-1236048

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

BEATY, ADAM M  
4070 MONZA DRIVE  
NEW SMYRNA BEACH, FL 32168 US

**Name and Address of New Registered Agent:**

BEATY, ADAM M  
2830 OSPREY COVE DRIVE  
NEW SMYRNA BEACH, FL 32168 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: ADAM BEATY

04/18/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: BEATY, ADAM M  
Address: 4070 MONZA DRIVE  
City-St-Zip: NEW SMYRNA BEACH, FL 32168 US

Title: VP ( ) Delete  
Name: BEATY, GREGORY T SR.  
Address: 4070 MONZA DRIVE  
City-St-Zip: NEW SMYRNA BEACH, FL 32168 US

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: P (X) Change ( ) Addition  
Name: BEATY, ADAM M  
Address: 2830 OSPREY COVE DRIVE  
City-St-Zip: NEW SMYRNA BEACH, FL 32168 US

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ADAM BEATY

PRES

04/18/2008

Electronic Signature of Signing Officer or Director

Date