2010 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P07000121952

Entity Name: WILLARD BROTHERS POOLS CORPORATION

Apr 14, 2010 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

8800 OSTROM WAY 6403 NORTH TURQUOISE POINT

WEEKI WACHEE, FL 34613 DUNNELLON, FL 34433

Current Mailing Address: New Mailing Address:

6403 NORTH TURQUOISE POINT 8800 OSTROM WAY

DUNNELLON, FL 34433 WEEKI WACHEE, FL 34613

FEI Number: 36-4620760 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

WILLARD, NICHOL 8800 OSTROM WAY

WEEKI WACHEE, FL 34613 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: NICHOL WILLARD

Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title:

Name: WILLARD, SCOTT

6403 NORTH TURQUOISE POINT Address:

City-St-Zip: DUNNELLON, FL 34433

Title: DT

Name: WILLARD, PATTI

6403 NORTH TURQUOISE POINT Address:

DUNNELLON, FL 34433 City-St-Zip:

Title: DS

WILLARD, NICHOL Name: 8800 OSTROM WAY Address:

City-St-Zip: WEEKI WACHEE, FL 34613

Title:

WILLARD, GLENN Name: Address: 8800 OSTROM WAY

City-St-Zip: WEEKI WACHEE, FL 34613

I hereby 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 all other like empowered.

SIGNATURE: NICHOL WILLARD DS 04/14/2010