


2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 20, 2004 08:00 AM
Secretary of State

DOCUMENT # P07891
 1. Entity Name
PADDOCK POOL BUILDERS, INC.



Principal Place of Business 555 PADDOCK PARKWAY PO BOX 11676 ROCK HILL, SC 29730	Mailing Address 555 PADDOCK PARKWAY PO BOX 11676 ROCK HILL, SC 29731 US
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DO NOT WRITE IN THIS SPACE



01082004 No Chg-P CR2E034 (10/03)

4. FEI Number 14-1378778	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
 CT CORPORATION SYSTEM
 1200 S. PINE ISLAND ROAD
 PLANTATION, FL 33324

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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE: _____ DATE: _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	CTD BAKER, WILLIAM H. 50 FARIWAY RIDGE CLOVER, SC
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD BAKER, MARLENE 50 FARIWAY RIDGE CLOVER, SC
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD BAKER, DONALD C 8 PINE POINT LAKE WYLIE, SC 29710
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V GRAVES, C.E. 2245 RAVEN DRIVE ROCK HILL, SC
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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 01/20/04-80065-010 150.00

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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Donald C. Baker **Donald C. Baker**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR **President** 1-8-04 (803) 324-1111
Date Daytime Phone #