## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P08000009924

Entity Name: FLIP FLOP POOL SERVICE, INC

FILED Apr 29, 2009 Secretary of State

Entity Nar	ne: FLIP FLOI	POOL SERVICE, INC						
Current Principal Place of Business:				New Principal Place of Business:				
1660 GEORGIANNA DR MERRITT ISLAND, FL 32952				6811 NORTH ATLANTIC AVE.				
MERRIII	ISLAND, FL 32	2952		CAPE CAN	NAVERAL, F	FL 32929		
Current Mailing Address:				New Mailing Address:				
1660 GEORGIANNA DR MERRITT ISLAND, FL 32952				6811 NORTH ATLANTIC AVE.				
				B CAPE CANAVERAL, FL 32929				
FEI Number:	26-2143508	FEI Number Applied For ( )	FEI Nui	mber Not Appl	icable ( )	Certific	ate of Status Desir	ed ( )
Name and Address of Current Registered Agent:				Name and Address of New Registered Agent:				
MARTIN, PATTI 1660 GEORGIANA DRIVE MERRITT ISLAND, FL 32952 US				MARTIN, PATTI 6811 NORTH ATLANTIC AVE B CAPE CANAVERAL, FL 32920 US				
	named entity s of Florida.	ubmits this statement for th	e purpose o	of changing i	ts registere	d office or	registered agent	, or both,
SIGNATURE: PATTI T. MARTIN				04/29/2009				
	Electron	ic Signature of Registered A	\gent				Date	
Election Car	npaign Financing	Trust Fund Contribution ( ).						
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:				
Title: Name: Address: City-St-Zip:	P () MARTIN, PATTI 1660 GEORGIA MERRITT ISLAN			Title: Name: Address: City-St-Zip:		() Change	( ) Addition	
Title: Name: Address: City-St-Zip:	()	Delete		Title: Name: Address: City-St-Zip:	VP KEESEE, R PO BOX 64: SHARPES.	ICK	(X) Addition	

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: PATTI T. MARTIN PRES 04/29/2009