

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000105684

Entity Name: JACKSON/BROWN POOLS, INC.

FILED
May 15, 2009
Secretary of State

Current Principal Place of Business:

13401 RICKENBACKER PARKWAY
FORT MYERS, FL 33913

New Principal Place of Business:

13401 RICKENBACKER PARKWAY STE. 1
FORT MYERS, FL 33913

Current Mailing Address:

13401 RICKENBACKER PARKWAY
FORT MYERS, FL 33913

New Mailing Address:

13401 RICKENBACKER PARKWAY STE. 1
FORT MYERS, FL 33913

FEI Number: 26-3959926

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BROWN, CARY A
13401 RICKENBACKER PARKWAY
FORT MYERS, FL 33913 US

Name and Address of New Registered Agent:

BROWN, CARY A
13401 RICKENBACKER PARKWAY STE. 1
FORT MYERS, FL 33913 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:

05/15/2009

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: D () Delete
Name: JACKSON, CHAD S
Address: 15801 SHAMROCK DRIVE
City-St-Zip: FORT MYERS, FL 33912

Title: D () Delete
Name: BROWN, CARY A
Address: 18435 DEEP PASSAGE LANE
City-St-Zip: FORT MYERS BEACH, FL 33913

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: JACKSON, CHAD S
Address: 15821 SHAMROCK DRIVE
City-St-Zip: FORT MYERS, FL 33912

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: CARY A. BROWN

PRES

05/15/2009

Electronic Signature of Signing Officer or Director

Date