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FILED

May 01 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P92000002917 (2)

1. Corporation Name

HUTCHINS & ANDRADE POOL SPECIALISTS, INC.

Principal Place of Business

Mailing Address

9704 KATY DRIVE
HUDSON FL 34667

9704 KATY DRIVE
HUDSON FL 34667

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

10/30/1992

4. FEI Number

59-3149326

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be
Added to Fees

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30. ☒ Yes ☐ No

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

HUTCHINS, KENNETH W
8874 DUNNELLON ROAD
BROOKSVILLE FL 34410

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

9704 KATY DRIVE

83

84 City
HUDSON

FL

85 Zip Code
34667

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

[Signature]

ARNALDO ANDRADE

ST

x

4-20-98

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent's signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP
DP
HUTCHINS, KENNETH W
8874 DUNNELLON RD.
BROOKSVILLE FL

1.1 TITLE ☒ Change ☐ Addition

1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP
D/P
HUTCHINS, KENNETH W.
9704 KATY DRIVE
HUDSON, FL 34667

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP
DVP
ANDRADE, PAUL
8874 DUNNELLON RD.
BROOKSVILLE FL

2.1 TITLE ☒ Change ☐ Addition

2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP
D/VP
ANDRADE, PAUL
9704 KATY DRIVE
HUDSON, FL 34667

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP
VP
ANDRADE, WALDIR
9704 KATY DR.
HUDSON FL

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP
ST
ANDRADE, ARNALDO
9704 KATY DR.
HUDSON FL

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE

KENNETH W. HUTCHINS

KENNETH W. HUTCHINS

CR2E034 (10/97)