

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

85

FILED
Apr 22, 1999 8:00 am
Secretary of State

04-22-1999 90009 042 ***158.75

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P92000007475

1. Corporation Name

A'SPREE POOL REMODELING, INC.

Principal Place of Business

5085 S HWY 17-92
CASSELBERRY FL 32707

Mailing Address

5085 S HWY 17-92
CASSELBERRY FL 32707

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

11/23/1992

4. FEI Number

59-3148807

Applied For

Not Applicable

5. Certificate of Status Desired

☒

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

Trust Fund Contribution

\$5.00 May Be
Added to Fees

8. This corporation owes the current year intangible
Personal Property Tax.

☐ Yes

☐ No

9. Name and Address of Current Registered Agent

PARKS, LOUIS H JR
532 STARSTONE DR
LAKE MARY FL 32746

10. Name and Address of New Registered Agent

81 Name

Louis H. Parks, Jr.

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

336 MacGregor Rd.

83

84 City

Winter Springs, FL

85 Zip Code

32708

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]

Louis H. Parks, Jr. Pres.

4-25-99

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

(NOTE: Registered Agent signature required when reinstating)

DATE

OFFICERS AND DIRECTORS

TITLE	VP	<input type="checkbox"/> DELETE
NAME	PARKS, CHYRL M.	
STREET ADDRESS	532 STARSTONE DR.	
CITY-ST-ZIP	LAKE MARY FL	
TITLE	VP	<input type="checkbox"/> DELETE
NAME	PARKS, LOUIS H.	
STREET ADDRESS	532 STARSTONE DRIVE	
CITY-ST-ZIP	LAKE MARY FL	
TITLE	PS	<input checked="" type="checkbox"/> DELETE
NAME	WATKINS, CLIFFORD S.	
STREET ADDRESS	1205 NORTH HART ROAD	
CITY-ST-ZIP	GENEVA FL	
TITLE	VP	<input checked="" type="checkbox"/> DELETE
NAME	HOPE, GEORGE E.	
STREET ADDRESS	P.O. BOX 1826 N/A	
CITY-ST-ZIP	CASSELBERRY FL 32718	
TITLE	VP	<input checked="" type="checkbox"/> DELETE
NAME	BEEN, MILTON	
STREET ADDRESS	P.O. BOX 1826 N/A	
CITY-ST-ZIP	CASSELBERRY FL 32718	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	V.P.	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
1.2 NAME	BEYER, MICHAEL	
1.3 STREET ADDRESS	5085 S. 17-92	
1.4 CITY-ST-ZIP	CASE, FL. 32707	
2.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME		
2.3 STREET ADDRESS		
2.4 CITY-ST-ZIP		
3.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY-ST-ZIP		
4.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-ST-ZIP		
5.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> 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, with all other like empowered.

SIGNATURE:

[Signature] Louis H. Parks, Jr. Pres.

Date

Daytime Phone #

CR2E034 (11/98)