

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996.
AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.)

PROFIT CORPORATION ANNUAL REPORT 1996		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P92000012738 (0)
1. Corporation Name

ALERT POOL SERVICE, INC.



Principal Place of Business 2626 HOPE STREET SARASOTA FL 34231-5118	Mailing Address 2626 HOPE STREET SARASOTA FL 34231-5118
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3. Date Incorporated or Qualified 12/14/1992	3a. Date of Last Report 05/01/1995
4. FEI Number 65-0382841	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No	

2. Principal Place of Business	2a. Mailing Address
21. Suite, Apt. #, etc.	26. Suite, Apt. #, etc.
22. City & State	27. City & State
23. Zip	28. Zip
24. Country	29. Country
25. Country	30. Country

9. Name and Address of Current Registered Agent	
MOORE, DONNA J 2626 HOPE ST. SARASOTA FL 34231-5118	

10. Name and Address of New Registered Agent	
81. Name	
82. Street Address (P.O. Box Number is Not Acceptable)	
83.	
84. City	85. Zip Code
FL	

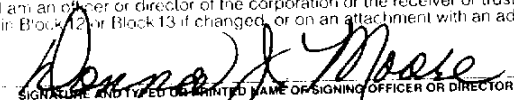
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent or both, in the State of Florida. Such change was authorized by the corporation's board of directors.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

SIGNATURE _____ (NOTE: Registered Agent signature is required when re-registering.) DATE _____

12. OFFICERS AND DIRECTORS	
TITLE	PTSD
NAME	MOORE, DONNA J
STREET ADDRESS	2626 HOPE ST.
CITY-ST-ZIP	SARASOTA FL
TITLE	VPD
NAME	MOORE, STUART E
STREET ADDRESS	2626 HOPE STREET
CITY-ST-ZIP	SARASOTA FL
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
11. TITLE	VPD
12. NAME	Richard P. Garton
13. STREET ADDRESS	2710 Hope St.
14. CITY-ST-ZIP	Sarasota, FL. 34231
21. TITLE	
22. NAME	
23. STREET ADDRESS	
24. CITY-ST-ZIP	
31. TITLE	
32. NAME	
33. STREET ADDRESS	
34. CITY-ST-ZIP	
41. TITLE	
42. NAME	
43. STREET ADDRESS	
44. CITY-ST-ZIP	
51. TITLE	
52. NAME	
53. STREET ADDRESS	
54. CITY-ST-ZIP	
61. TITLE	
62. NAME	
63. STREET ADDRESS	
64. CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 617, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: 
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

8/6/95 941-972-6459
Date and Phone

CR2E034 (3/96)