2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 19, 2009
Secretary of State

DOCUMENT# P93000028240

Entity Name: BLUE HORIZONS POOLS AND SPAS, INC.

Current Principal Place of Business:

1335 BENNETT DRIVE
LONGWOOD, FL 32750

New Principal Place of Business:

616 W. EVERGREEN CT.
LONGWOOD, FL 32750

Current Mailing Address:

1335 BENNETT DRIVE
LONGWOOD, FL 32750 US

New Mailing Address:

616 W. EVERGREEN CT.
LONGWOOD, FL 32750

FEI Number: 59-3177198 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

COAMEY, EDWARD
2699 LEE ROAD
STE 430
WINTER PARK, FL 32789 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: DPT ( ) Delete
Name: LARSEN, GARY C
Address: 1863 POINCIANA ROAD
City-St-Zip: WINTER PARK, FL

Title: VS ( ) Delete
Name: OLSON, MARTY J
Address: 208 PAUL MCCLURE CT
City-St-Zip: CASSELBERRY, FL 32707

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

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: GARY C. LARSEN SR. DPT 01/19/2009

Electronic Signature of Signing Officer or Director Date