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PROFIT CORPORATION ANNUAL REPORT



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

1996

DOCUMENT #

P93000032739 (3)

QUALITY POOL ENCLOSURES, INC.

Principal Place of Business

Mailing Address

FILED Mar 13 1996 8:00 am Secretary of State



1800-A EL JOBEAN ROAD PORT CHARLOTTE FL 33948-1249		1800-A EL JOBEAN ROAD PORT CHARLOTTE FL 33948-1249						
2. Pringrand	Dage of Universe				3. Date Incorporated or Qualified 05/05/1993	3a. Date of Las 01/26/		
2. Principal Place of Business 21 Suite, Apt #, etc 22 Oty & State		2a. Mailing Address 26			4. FEI Number 65-0464276		Applied For Not Applicable	
		Suite, Apt. #, etc.	27		5. Certificate of Status Desired		\$9.75 Additional	
23] Zip		Oity & State			Election Campaign Financing Trust Fund Contribution	□ \$5	.00 May Be	
24	Country [25]	Zip 29	Goun 30	lry		intangible tax unde	rs 199.032,	
	9. Name and Address of Curr	ent Hegistered Agent			10. Name and Address of New F	Registered Agent		
GRANT	T DUILLID W		1	Name				
Grant, Phillip W 1800-a el Jobean Road Port Charlotte fl 33948-1249				82 Street Address (P.O. Box Number is Not Acceptable) 83				
rom	CIMILOTTE FL 33946-1249		3	33				
11 Ouround	Ac the			4 City			Zip Code	
or registe	to the provisions of Sections 607,056 ered agent, or both, in the State of Fig	02 and 607,1508, Florida Statu orida. Such change was author	ites, the above	named corpo	pration submits this statement for the pur ard of directors. I hereby accept the app		ts registered office	
fautulian w	ith, and accept the obligations of. Se	ction 607.0505, Florida Statute	os.	iporation's po	are or directors. I nereby accept the appr	ointment as register	red agent. I am	
SIGNATURE	Signature Typed or pricted han biot registered age	outti outus ou est en est est e						
12.		ND DIRECTORS		porit signature requir	ed wher reinstaling)	DATE		
			4.2		1			
7 T1 F	P		13.		ADDITIONS/CHANGES TO OFF			
	P Grant, Phillip W	DELETE	1. 1 TITL		ADDITIONS/CHANGES TO OFFI	ICERS AND DIREC		
NAME	P Grant, Phillip W 1800-a el Jobean Rd.		1. 1 TITL 1 2 NAM	ε	ADDITIONS/CHANGES TO OFF			
NAME STECKT ADDRESS	1800-A EL JOBEAN RD.	☐ DELETE	1. 1 TITE 1 2 NAM 1.3 STRE	E ET ADDRESS	ADDITIONS/CHANGES TO OFF			
NAME STECET ADDRESS CTY-ST-ZIP		□ DELETE 18-1249	1. 1 TIYL 1 2 NAM 1.3 STRE 1 4 CHY	E ET ADORESS - ST - ZIP	ADDITIONS/CHANGES TO OFFI	☐ Chang	e 🗌 Addition	
NAME STECET ADDRESS CITY - STE ZIP TITUE	1800-A EL JOBEAN RD. PORT CHARLOTTE FL 3394	☐ DELETE	1. 1 TIYL 1 2 NAM 1.3 STRE 1 4 CIYY 2 1 TIYL	ET ADDRESS -ST-ZIP	ADDITIONS/CHANGES TO OFFI		e 🗌 Addition	
AAM STHEFT ADDRESS CTY-ST-ZIP TITLE NAME	1800-A EL JOBEAN RD. PORT CHARLOTTE FL 3394 DST	□ DELETE 18-1249	1. 1 TITL 12 NAM 1.3 STRE 1.4 CHY 2. 1 TITL 2.2 NAME	E ET ADDRESS ST. ZIP	ADDITIONS/CHANGES TO OFFI	☐ Chang	e 🗌 Addition	
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certly 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 appears in Block 12 or Block 13 if changed, or on an attachment vitit annual report is true and execute this report as required by Chapter 607, Florida Statutes; and that my name

SIGNATURE:

GIGNATURE AND TYPED OR PRINTED WARE OF MINING OFFICER OR DIRECTOR

941-743.7561