2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P93000032739

City-St-Zip:

VENICE, FL

Entity Name: OHALITY POOL ENCLOSURES INC

FILED Apr 10, 2009 Secretary of State

Littly Nai	me. QUALITI	FOOL LINGLOSURES, INC.				
Current Principal Place of Business:			New Prince	New Principal Place of Business:		
	N CASA DR. DOD, FL 3422	4				
Current Mailing Address:			New Maili	ng Addre	ess:	
PMB#191	TAMIAMI TRAII FL 342935022	-				
FEI Number:	: 65-0464276	FEI Number Applied For ()	FEI Number Not App	licable ()	Certificate of Status Desired ()	
Name and	Address of C	urrent Registered Agent:	Name and	Address	of New Registered Agent:	
The above	ARD DR. FL 342853301		e purpose of changing i	ts registe	red office or registered agent, or both,	
SIGNATUR	RE:					
Election Car		ic Signature of Registered A Trust Fund Contribution().	gent		Date	
OFFICERS AND DIRECTORS:			ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	DP () PIKE, DAVID E 420 BAYNARD I VENICE, FL 34		Title: Name: Address: City-St-Zip:		() Change () Addition	
Title: Name: Address:	DVST () SMITH, BILL D 560 NEPONSIT	Delete DRIVE	Title: Name: Address:	DVST SMITH, B 560 NEP	(X) Change()Addition ILL D ONSIT DRIVE	

City-St-Zip:

VENICE, FL 34293

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: BILL D. SMITH **DVST** 04/10/2009