

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P93000042935

Entity Name: RIVIERA POOLS OF TAMPA, INC.

FILED  
Jan 20, 2009  
Secretary of State

## Current Principal Place of Business:

14409 B N. NEBRASKA AVE.  
TAMPA, FL 33613

## New Principal Place of Business:

## Current Mailing Address:

14409 B N. NEBRASKA AVE.  
TAMPA, FL 33613

## New Mailing Address:

FEI Number: 59-3222695

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

MOLTER, WILLIAM  
14409 B N. NEBRASKA AVE.  
TAMPA, FL 33613 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: DP ( ) Delete  
Name: MOLTER, WILLIAM  
Address: 4209 BRIARBERRY DR.  
City-St-Zip: TAMPA, FL 33624

Title: DVST ( ) Delete  
Name: MOLTER, CELESTE  
Address: 4209 BRIARBERRY DR.  
City-St-Zip: TAMPA, FL 33624

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change ( ) Addition  
Name: MOLTER, WILLIAM  
Address: 5311 WESTSHORE BLVD  
City-St-Zip: NEW PORT RICHEY, FL 34652

Title: DVST (X) Change ( ) Addition  
Name: MOLTER, CELESTE  
Address: 5311 WESTSHORE BLVD  
City-St-Zip: NEW PORT RICHEY, FL 34652

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: WILLIAM MOLTER

PRES

01/20/2009

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date