

FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

FILED

Apr 29 1997 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1997



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

DOCUMENT # ~~93000048738~~

1. Corporation Name

~~THE POOL PLACE, INC.~~

THE POOL PLACE, INC.

P93000048738

Principal Place of Business

Mailing Address

~~1135 N. COURTENAY PARKWAY  
ROCKLEDGE, FL 32953~~

~~1135 N. COURTENAY PARKWAY  
ROCKLEDGE, FL 32953~~

888 Cardinal Avenue  
Rockledge, FL 32955

Same

3. Date Incorporated or Qualified

3a. Date of Last Report

~~03/01/93~~

2. Principal Place of Business

21 1135 N. Courtenay Parkway

2a. Mailing Address

26 Same

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

22 Merritt Island, FL

City & State

Zip

24 32953

Country

25 BREVARD

Zip

28

Country

30

4. FEI Number

59-3200961

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution

☐

\$5.00 May Be  
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,  
Florida Statutes

☐ Yes

☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

~~JOHN E. JOHNSON, V  
888 Cardinal Avenue  
Rockledge, FL 32955~~

JOHN E. JOHNSON, V  
888 Cardinal Avenue  
Rockledge, FL 32955

81 Name

JOHN E. JOHNSON, V

82 Street Address (P.O. Box Number is Not Acceptable)

83

1135 N. Courtenay Parkway

84 City

Merritt Island

FL

85 Zip Code

32953

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.

JOHN E. JOHNSON, V April 22, 1997

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE D/P ☒ DELETE  
NAME ~~EMMALINE JOHNSON~~  
STREET ADDRESS ~~888 Cardinal Ave.~~  
CITY-ST-ZIP ~~Rockledge, FL 32955~~

TITLE D/S/T ☒ DELETE  
NAME JOHN E. JOHNSON, V  
STREET ADDRESS 888 Cardinal Avenue  
CITY-ST-ZIP Rockledge, FL 32955

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

1.1 TITLE D/P JOHN E. JOHNSON, V ☐ Change ☒ Addition  
1.2 NAME 1135 N. Courtenay Parkway  
1.3 STREET ADDRESS Merritt Island, FL 32953  
1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition  
2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

6.1 TITLE  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP

400002162214  
-05/01/97--01082--035  
\*\*\*165.00

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

JOHN E. JOHNSON, V, President

April 22, 1997

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

0108400

CR2E034 (9/96)