2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P93000053532

1. Entity Name

FIRST CHOICE POOLS AND SPAS, INC.



Principal Place of Business

LUTZ, FL 33559

2507 HIGH OAKS LANE

Mailing Address

2507 HIGH OAKS LANE

LUTZ, FL 33559

FILED Mar 26, 2007 08:00 AM Secretary of State



DO NOT WRITE IN THIS SPACE

BIGNATURE AND TYPED OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

6. Name and Address of Current Registered Agent

00 020 11.11	eo -	-	Additional
59-3204777			Not Applicable
4. FEI Number			Applied For

5. Certificate of Status Desired

No Chg-P

02262007

\$8.75 Addition Fee Required

CR2E034 (11/05)

MERRELL, JACK C. JR. 2507 HIGH OAKS LANE LUTZ. FL 33559

DO NOT WRITE IN THIS SPACE

3/21/07

]	IN THIS STACE				
8. 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. I am familiar with, and accept the obligations of registered agent.							
SIGNATURE							
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE							
	E NOW!!! FEE IS \$150.00 ay 1, 2007 Fee will be \$550.00	Election Campaign Financing Trust Fund Contribution.		\$5.00 May Be Added to Fees			
10.	OFFICERS AND DIREC	TORS					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P MERRELL, JACK C JR 2507 HIGH OAKS LANE LUTZ, FL 33559						
TITLE NAME STREET ADDRESS CITY-ST-ZIP					000000679420 04/03/07-80037-012 150.00		
TOTLE HAME STREET ADDRESS CITY-ST-ZIP				DO	NOT WRITE		
TITLE NAME STREET ADDRESS CITY-ST-ZIP				IN '	THIS SPACE		
TITLE NAME STREET ADDRESS CITY-ST-ZIP							
TITLE							
NAME							
STREET ADDRESS CITY-ST-ZIP							
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with an addition, with all other like empowered.							