SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998. AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

Mailing Address

P.O. BOX 1434 **BRANDON FL 33509**

PROFIT CORPORATION ANNUAL REPORT

Principal Place of Business

203 PROVIDENCE RD.

BRANDON FL 33510

TITLE.

NAME

STREET ADDRESS

CITY-ST-ZIP



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P94000013998 (7)

BRANDON POOL SITTERS, INC.

Principal Place of Business 2a. Malling Address Applied For 26 Not Applicable 64-0471051 Suite, Apt #, etc. Sulte, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 27 Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Zip Country Zφ Country 8. This corporation owes or has paid the current fear Intangible 29 30 24 25 Personal Property Tax due June 30. 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent BADER, JANET D J. BADER III 3002 RIDGE VALE CIR. 82 VALRICO FL 33594 83 Zip Code 3363.7 Pursuant to the provisions of sections 07.0502 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 rection 607.0505; Florida Statutes. SIGNATURE (NOTE: Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE 1.1 TITLE __ DELETE Change Addition BADER, LOUIS J III NAME 1.2 NAME 3002 RIDGE VALE CIRCLE STREET ADDRESS 1.3 STREET ADDRESS VALRICO FL 33594 CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE 2.1 TITLE Addition ___ Change BADER, JANET D 2.2 NAME NAME 3002 RIDGE VALE CIR. STREET ADDRESS 2.3 STREET ADDRESS VALRICO FL CITY-ST-ZIP 2.4 CITY-ST-ZIP TITLE 31 TITLE DELETE Change 3.2 NAME NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4 CITY-ST-ZIP TITLE DELETE 4.1 TITLE Change Addition 4.2 NAME STREET ADDRESS 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIP DELETE 5.1 TITLE ___ Change Addition NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

DELETE

14. I 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 eath; 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 13 if changed of on an attachment with an address.

___ Change

___ Addition

CR2E034 (5/98)

FILED

Sep 17 1998 8:00am

Secretary of State

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

02/21/1994