2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P94000017609

Address:

Title:

City-St-Zip:

430 E 4TH ST

CHULUOTA, FL 32776

() Delete

FILED Apr 17, 2004 Secretary of State

Entity Nar	ne: STEVE'S	POOLS, INC.			•	
Current P	rincipal Place	of Business:	New Prin	New Principal Place of Business:		
430 E 4TH CHULUOT	ST A, FL 32776			430 E 4TH ST CHULUOTA, FL 32766		
Current M	ailing Addres	s:	New Mail	New Mailing Address:		
430 E 4TH ST CHULUOTA, FL 32776				430 E 4TH ST CHULUOTA, FL 32766		
FEI Number: 59-3224666 FEI Number Applied For() F		FEI Number Not App	olicable ()	Certificate of Status Desired ()		
Name and	Address of C	urrent Registered Agent:	Name and	Name and Address of New Registered Agent:		
7139 TIMB	MARGARET ER DR PARK, FL 3279					
	named entity s e of Florida.	submits this statement for the p	ourpose of changing	its registered	office or registered agent, or both,	
SIGNATUR	RE:					
	Electron	ic Signature of Registered Age	ent	Date		
Election Can	npaign Financing	g Trust Fund Contribution ().				
OFFICERS	S AND DIREC	TORS:	ADDITIO	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	PT () MCMILLAN, ST 430 E 4TH ST CHULUOTA, FL		Title: Name: Address: City-St-Zip:	PT (MCMILLAN, S 430 E 4TH S [*] CHULUOTA,	Т	
Title: Name:	VS () MCMILLAN, DE	Delete BORAH	Title: Name:	VP (MCMILLAN, I	(X) Change ()Addition DEBORAH	

Address:

Title:

City-St-Zip:

430 E 4TH ST

CHULUOTA, FL 32766

() Change (X) Addition

 Name:
 Name:
 ELMORE, EUGENE

 Address:
 Address:
 170 3RD. CT.

 City-St-Zip:
 City-St-Zip:
 CHULUOTA, FL 32766

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: STEVE MCMILLAN PT 04/17/2004