

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 JAN 18 PM 2:37

DOCUMENT # P94000018855 (4)

1. Corporation Name

SUN POOLS, INC.

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified **03/01/1994** 3a. Date of Last Report **N/A**

4. FEI Number **65-0478765** 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

2. Principal Place of Business 2a. Mailing Address
21 **8507 S TAMiami TRAIL** 26 **8507 S. TAMiami TRAIL**
22 Suite, Apt. #, etc. 27 Suite, Apt. #, etc.
23 **SARASOTA FLORIDA** 28 **SARASOTA FLORIDA**
24 **34238** 25 **SARASOTA** 29 **34238** 30 **SARASOTA**

9. Name and Address of Current Registered Agent

BROWN, PATRICK E SR
542 WESTMOUNT LN
VENICE FL 34293

10. Name and Address of New Registered Agent

81 Name **PATRICK E. BROWN SR.**
82 Street Address (P.O. Box Number is Not Acceptable) **8507 S. TAMiami TRAIL**
83 **-**
84 City **SARASOTA** FL 85 Zip Code **34238**

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.

SIGNATURE

(Signature of Patrick E. Brown, Sr., registered agent, and typed name of registered agent, and typed name of director or officer)

(Signature of Patrick E. Brown, Sr., registered agent, and typed name of registered agent, and typed name of director or officer)

12. OFFICERS AND DIRECTORS

111 TITLE **D**
112 NAME **BROWN, PATRICK E SR**
113 STREET ADDRESS **542 WESTMOUNT LN**
114 CITY, ST, ZIP **VENICE FL 34293**
121 TITLE
122 NAME
123 STREET ADDRESS
124 CITY, ST, ZIP
131 TITLE
132 NAME
133 STREET ADDRESS
134 CITY, ST, ZIP
141 TITLE
142 NAME
143 STREET ADDRESS
144 CITY, ST, ZIP
151 TITLE
152 NAME
153 STREET ADDRESS
154 CITY, ST, ZIP
161 TITLE
162 NAME
163 STREET ADDRESS
164 CITY, ST, ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

111 TITLE ☒ Change ☐ Addition
112 NAME
113 STREET ADDRESS **8507 S. TAMiami TRAIL**
114 CITY, ST, ZIP **SARASOTA, FLORIDA 34238**
121 TITLE ☐ Change ☐ Addition
122 NAME
123 STREET ADDRESS
124 CITY, ST, ZIP
131 TITLE ☐ Change ☐ Addition
132 NAME
133 STREET ADDRESS
134 CITY, ST, ZIP
141 TITLE ☐ Change ☐ Addition
142 NAME
143 STREET ADDRESS
144 CITY, ST, ZIP
151 TITLE ☐ Change ☐ Addition
152 NAME
153 STREET ADDRESS
154 CITY, ST, ZIP
161 TITLE ☐ Change ☐ Addition
162 NAME
163 STREET ADDRESS
164 CITY, ST, ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.03(2)(b), 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 a registered agent or trustee empowered to execute this report as required by Chapter 407, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed or on an addition with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

PATRICK E. BROWN, SR

1-12-95

(813) 927-3379