2008 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P94000021745

Title:

Name:

Address: City-St-Zip: STD

MATZ, RHONDA

591 WEBER BLVD.

NAPLES, FL 34120

(X) Delete

Entity Name: B & N POOL RENOVATIONS INC.

FILED Jun 17, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 591 WEBER BLVD N NAPLES, FL 34120 US **Current Mailing Address: New Mailing Address:** 591 WEBER BLVD N NAPLES, FL 34120 US FEI Number: 65-0500837 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: NEVILLE, LARRY 591 WEBER BLVD. NAPLES, FL 34120 US 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. SIGNATURE: Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: () Change () Addition NEVILLE, LARRY Name: Name: 591 WEBER BLVD. Address: Address: City-St-Zip: NAPLES, FL 34120 City-St-Zip: Title: VD Title: () Change () Addition () Delete Name: BUCK, KEITH Name: 591 WEBER BLVD. Address: Address: NAPLES, FL 33964 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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.

Title:

Name:

Address:

City-St-Zip:

SIGNATURE: LARRY NEVILLE P 06/17/2008

() Change () Addition