FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Socretary of State DIVISION OF CORPORATIONS

	MENT # P94000(NGDALE POOL SERVICE, IN					
Principal Place of Business 2806 N. 94 TH ST TAMPA FL 33605 US		Mailing Address 813 E. BLOOMIGGSALE AVE. \$TE. 139 BRANDON FL 33511				
		US			3. Date Incorporated or Qualified 06/10/1994	3a. Date of Last Report 05/01/1996
2. Principal Place of Business		2a. Mailing Address		A 1. A	4. FEI Number	Applied For
21 2508 MASON DAKS Drive Sulte, Apt. #, etc.		26 2508 Mason Onks Or.		59-3250050	Not Applicable	
22		27		5. Certificate of Status Desired	\$8.75 Additional Fee Required	
City & State 23 UMCICO FI.		City & State 28 VALCICO F/.		Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees	
24 Zip 33(Country //s, 25 Hills, 9. Name and Address of Current		Country 30	USA	8. This corporation has tiability for Florida Statutes 10. Name and Address of New Re	Yes No
THORN, W. THOMPSON III				Name	1	<u></u>
BARNETT PLAZA, SUITE 2500			82	Street Addres	ss (P.O. Box Number is Not Acceptat	ole)
101 EAST KENNEDY BOULEVARD TAMPA FL 33802			83			
11 11111	TATE GOODE		84	City		85 Zip Code
				1		
11. Pursuant office or r	to the provisions of Sections 607.0502 registered agent, or both, in the State c am familiar with, and account of obligat	and 607.1508, Florida Statutes of Florida, Such change was au	s, the above uthorized by	e-named corpor y the corporatio	ration submits this statement for the p in's board of directors. I hereby accep	ourpose of changing its registered pt the appointment as registered
agent. Fa	ım ramıllar with, ayır nogustay obligat	ions of, Section 607.0505, Flor	ida Statute:	5.	(4-8-97
			Flegistered Age	eni signature required		DATE DEPO AND DIDEOTORS IN 40
12.	DEFICERS AND	OFFICERS AND DIRECTORS 13		T	ADDITIONS/CHANGES TO OFFIC	Change Addition
NAME	LOTT, RICK ALLEN		12 NAME			•
STREET ADDRESS	2508 MASON OAKS DRIVE		1.3 STREET ADDRESS			
CITY-ST-ZIP			1.4 CHY- S 2.1 TITLE	T-ZIP		Change Addition
NAME	LOTT, DIANA		2.2 NAME			Onlings Rubinon
STREET ADDRESS	2508 MASON OAKS DRIVE		2.3 STREET	ADURESS		
CITY-ST-ZIP	VALRICO FL 33594		2.4 CITY-	S1-20°		
TITLE NAME	DADIED JOHANNE		3.1 11111			L_ Change L_ Addition
STREET ADORESS	A4A P DI GOLINGO ALP GODE		3.2 NAME 3.3 STREET	ADDRESS		
CITY-ST-ZIP	BRANDON DI ODEAA		3.4. CITY - S	ſ		
TITLE	D DELETE 4.1		4.1 TITLE			Change Addition
NAME	PARKER, MARY L		4 2 NAME			
STREET ADDRESS	813 E. BLOOMINGDALE DRIVE BRANDON FL 33511		4.3 STREET			
CITY-ST-ZIP TITLE	BRANDON FE 33311	DELETE	4.4 CHY-S 5.1 TITLE	1 - ZIP		Change Addition
NAME			5.2 NAME			
STREET ADDRESS			5.3 STREET	ADDRESS		
CITY-\$T-ZIP			5.4 CITY - S	1-2IP		
TITLE		∐ DEL€TE	6.1 1111.E			Change L Addition
NAME STREET ADDRESS			6.2 NAME 6.3 STREET	ADDOCCC		
CITY-ST-ZIP			6.4 DITY-S			
14. I do herek	by certify that the information supplied	with this filing does not qualify	for the exe	motion stated in	n Section 119.07(3)(i), Florida Statute	s. I further certify that the
l am an o	on Indicated on this annual report or su flicer or director of the corporation or the in Block 12 or Block 13 if changed, or c	he receiver or trustee empower on an attachment with an addre	red to exec ess.	ute this report a	as required by Chapter 607, Florida S	reneed as it made under eath; that itatutes; and that my name
SIGNAT	URE: ##	MILL BUKIN		s#f	President 4-P.97	CEP2-483-618

FILED

Apr 14 1997 8:00am

Secretary of State