SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996.
AMOUNT DUE ON OR BEFORE 8/7/96: $225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: $375.)

PROFIT CORPORATION ANNUAL REPORT
1996

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

DOCUMENT # **P94000058215 (2)**

1. Corporation Name

SUNSET POOLS OF CENTRAL FLORIDA, INC.

Principal Place of Business	Mailing Address
519 TERRACE VIEW COVE ~~APT #3-104~~ ~~ALTAMONTE SPRINGS FL 32714~~ US	519 TERRACE VIEW COVE ~~APT. #3-104~~ ~~ALTAMONTE SPRINGS FL 32714~~ US

3. Date Incorporated or Qualified: 08/01/1994
3a. Date of Last Report: 06/30/1995

2. Principal Place of Business	2a. Mailing Address
21 682 SAUSALITO BLVD	26 682 SAUSALITO BLVD
Suite, Apt #, etc: 22	Suite, Apt #, etc: 27
City & State: 23 CASSELBERRY, FL	City & State: 28 CASSELBERRY, FL
Zip: 24 32707-5731 Country: 25 SEMINOLE	Zip: 29 32707-5731 Country: 30 SEMINOLE

4. FEI Number: 59-3258207 ☐ 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

9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
BLANCO, TIMOTHY A ~~627 DORY LANE~~ ~~ALTAMONTE SPRINGS FL 32714~~	81 Name 82 Street Address (P.O. Box Number is Not Acceptable): 682 SAUSALITO BLVD 83 C 84 City: CASSELBERRY FL 85 Zip Code: 32707-5731

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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	PD	☐ DELETE	1.1 TITLE		☐ Change ☐ Addition
NAME	BLANCO, TIMOTHY A		1.2 NAME		
STREET ADDRESS	519 TERRACE VIEW COVE #3-104		1.3 STREET ADDRESS	682 SAUSALITO BLVD	
CITY-ST-ZIP	ALTAMONTE SPRINGS FL		1.4 CITY-ST-ZIP	CASSELBERRY, FL 32707-5731	
TITLE	~~SD~~	☑ DELETE	2.1 TITLE		☐ Change ☐ Addition
NAME	~~PHILLIPS, DAVID A~~		2.2 NAME		
STREET ADDRESS	~~629 DORY LANE, #107~~		2.3 STREET ADDRESS		
CITY-ST-ZIP	~~ALTAMONTE SPRINGS FL 32714~~		2.4 CITY-ST-ZIP		
TITLE	~~TD~~	☑ DELETE	3.1 TITLE		☐ Change ☐ Addition
NAME	~~BEATY, ROBERT D~~		3.2 NAME		
STREET ADDRESS	~~1000 CHATHAM CIRCLE~~		3.3 STREET ADDRESS		
CITY-ST-ZIP	~~APOPKA FL 32703~~		3.4 CITY-ST-ZIP		
TITLE		☐ DELETE	4.1 TITLE		☐ Change ☐ Addition
NAME			4.2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 CITY-ST-ZIP		
TITLE		☐ DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY-ST-ZIP		
TITLE		☐ DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP			6.4 CITY-ST-ZIP		

CR2E034 (3/96)

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 119.07(3)(k), 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 the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed or on an attachment with an address.

SIGNATURE: Timothy A Blanco TIMOTHY A BLANCO 7/22/96
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #