2008 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 06, 2008 8:00 am
Secretary of State
02-06-2008 90029 009 ***158.75

DOCUMENT # P94000068269 (LAST 9 YRS)

1. Entity Name

AGM SERVICES, INC. DBA ATKINS Pool Co.

Principal Place of Business	Mailing Address
673 E. GULF BEACH DRIVE ST GEORGE ISLAND FL 32328 US	673 E. GULF BEACH DRIVE ST GEORGE ISLAND FL 32328 US

1st MOORE CR2E034 (10/07)

2. Principal Place of Business - No P.O. Box #	3. Mailing Address
673 E GULF Beach Dr	SAME
Suite, Apt. #, etc.: N/A	Suite, Apt. #, etc.: N/A
City & State: ST GEORGE IS FL	City & State: SAME
Zip: 32328 Country: FRANKLIN	Zip: SAME Country: SAME

4. FEI Number: NO-T APPLICABLE ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☒ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
AGM SERVICES, INC DBA ATKINS Pool COMPANY ATKINS, J. STEVEN 673 E. GULF BEACH DRIVE ST. GEORGE ISLAND FL 32328 LAST 9 YRS COMPANY LIVED LIKE ↑	Name Street Address (P.O. Box Number is Not Acceptable) City **FL** Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE: J STEVEN Atkins 1-29-08
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS $150.00
After May 1, 2008 Fee Will Be $550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P ATKINS, J. STEVEN 673 E. GULF BEACH DRIVE ST. GEORGE ISLAND FL 32328	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition N/A
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VP ATKINS, LEIGH 673 E. GULF BEACH DRIVE EASTPOINT FL 32338	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S BANKS, TIM 673 E GULF BEACH DRIVE EASTPOINT FL 32328	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: J STEVEN Atkins 1/29/08 (850) 899-3443
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #