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

PROFIT CORPORATION ANNUAL REPORT

1996

City & State

1101 SW 12TH STREET



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT # 1. Corporation Name	P94000069978	(2)

BENSON'S POOL SERVICE, INC.

BENSON'S POOL SERVICE	E, ING-			
Principal Place of Business	Mailing Address	1 1201(00) (12 1011 01211 0211		
1101 SW 12TH STREET BOCA RATON FL 33486	1101 SW 12TH STREET BOCA RATON FL 33486			
		3. Date Incorporated or Qualified	3a. Date of Last Report	
		09/21/1994	05/10/1995	
2. Principal Place of Business	2a. Maling Address	4. FEI Namber	Applie	
	26	65-0515351	Not A	
Suite Apt. #, etc.	Suite, Apt. #, etc.	5. Certificate of Status Desired	\$8.75 Add Fee Requ	

23 8. This corporation has liability for intangible tax under single 199.032, Florida Statutes ☐ Yes ☑ No Country Country Zip 30 29 24 25 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Street Address (P.O. Box Number is Not Acceptable) BENSON, CHRISTOPHER A 82

City & State

BOCA PATON FL 33486	84	4 City FL 85 Zip Code
Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutus, the aboor registered agent, or both, in the State of Florida. Suich change was authorized by the classifier with and accent the obligations of, Section 607.0505, Florida Statutes.	cort. ive-i	 named corporation submits this statement for the purpose of changing its registered offic poration's board of directors. Thereby accept the appointment as registered agent. Lam

6. Election Campaign Financing

Trust Fund Contribution

SIGNATURE _		The state of the s	E. Fig. p.b and Agent suprature required	when reproducting) DATE
12.	Superace, by ed or punted national resistered a perhabilities if OFFICERS AND DIRE	CIORS	13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	D	DELETE	1 1 TITLE	Ctrange Addition
NAME	BENSON, CHRISTOPHER A		1.2 NAME	
STREET ADDRESS	1101 SW 12TH STREET		1.3 STHEET ADDRESS	
CITY-ST-ZIP	BOCA RATON FL 33486		1.4 C(TY - S1 - Z)P	neitibbA
TITLE		DELETE	2 1 16(6	Change Addition
NAME			2 2 NAME	
STREET ADDRESS			2.3 STHEFT ADDRESS	
CITY-ST ZIP			24 C(1Y - S1 - Z)()	Change Addition
TITLE		DEL ETE	3 1 THUF	Charge notified
NAME			3.2 NAMÉ	
STREET ADDRESS			33 STREET ADDRESS	
City-St-ZiP			3.4 CitY+ST_ZIP	Change Addition
THILE		DELETE	4 1 TITLE	El ciarde El vooritori
NAME			4.2 NAME	
STREET ADDRESS			4.3 STREET ADDRESS	
CITY - S1 - ZIP			4.4 City St-ZiP	Addition
THLE		☐ DELETE	5 1 THE	500001819456 □ Addition -05/14/9601010003
NAME			5.2 NAME	***200.00
STREET ADDRESS			5.3 STREET ADDRESS	<u> </u>
CITY-ST-ZIP		, ,	5.4 CHY+SI+ZiF	Change Addition
TITLE		☐ DELETE	6 1 TiTLE	L 1C V
NAME			6.2 NAME	SING COL

14. I do hereby certify that the information supplied with this fing is voluntarily furnished and does not qualify fur 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 accorate and that my signature shall have the same legal effect as if made under cath; 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 12 or Block 13 if changed, or on an attachment with an address.

6.3 STREET ADDRESS

SIGNATURE:

STREE (ADDRESS

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

\$-30.96 407362-9583

Applied For Not Applicable \$8.75 Additional Fee Required \$5.00 May Be

Added to Fees