

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
Sep 19, 2002 8:00 am
Secretary of State

09-19-2002 90160 045 ***150.00

DOCUMENT # P95000017851

1. Entity Name

Crystal Pools & SPAS INC.

DO NOT WRITE IN THIS SPACE

B0139656

2. Principal Place of Business

1373 Rosemary Dr.

3. Mailing Address

P.O. Box 362386

Suite, Apt. #, etc.

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State

Melbourne

City & State

Melbourne FL

4. FEI Number

593304362

Applied For

Not Applicable

Zip 32935

Country

BREUARD

Zip 32936

Country

BREUARD

5. Certificate of Status Desired

☐

**\$8.75 Additional
Fee Required**

7. Name and Address of Current Registered Agent

Name

Woodberry, Robert

Street Address (P.O. Box Number is Not Acceptable)

1373 Rosemary Dr

City

Melbourne

FL

Zip Code

32935

**DO NOT WRITE
IN THIS SPACE**

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when re-registering)

DATE

**9. This corporation is eligible to satisfy its intangible
Tax filing requirement and elects to do so.**
(See criteria on back) ☐

January 1 - May 1 Fee is \$150.00

After May 1, Fee is \$550.00

Amended UBR is \$61.25

Make Check Payable to Department of State

**10. Election Campaign Financing
Trust Fund Contribution.** ☐

**\$5.00 May Be
Added to Fees**

11. OFFICERS AND DIRECTORS

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

PD
Woodberry, Robert
1373 Rosemary Ave
Melbourne FL 32935

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

STD
Woodberry Emily
1373 Rosemary Ave
Melbourne FL 32935

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE

NAME

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IN THIS SPACE**

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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 11 or on an attachment with an address, with all other like empowered.

SIGNATURE

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

9-16-02 (21) 917544

Date

Corporate Phone #

CR2E034B (12/01)

Attachment

P9S000017851

Robert Woodberry, President
Crystal Pools and Spas, Inc.
POB: 1373 Rosemary Drive
Mailing: PO Box 362386
Melbourne, FL 32936
321.254.0806

September 17, 2002

Florida Department of State
Division of Corporations
Uniform Business Report Filings
PO Box 1500
Tallahassee, FL 32302-1500

While reviewing our records on September 10, 2002 we realized that we never received our 2002 Uniform Business Report. I called your office and was instructed to compose a letter stating our problem and to download a Blank UBR form your website, Complete the form, and send it in along with the \$150.00 filing fee.

Please find the signed document and check enclosed in this mailing.

Thank you for your help in this matter.

Robert Woodberry, President

enclosure