2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 22, 2004
Secretary of State

DOCUMENT# P95000030158

Entity Name: TROPICAL POOLS AND SPAS INC

Current Principal Place of Business:

2250 LEE ROAD
101
WINTER PARK, FL 32789 US

New Principal Place of Business:

Current Mailing Address:

2250 LEE ROAD
101
WINTER PARK, FL 32789 US

New Mailing Address:

FEI Number: 59-3312424 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

ALSTOTT, ADAM
2250 LEE RD
SUITE #101
WINTER PARK, FL 32789 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: ALSTOTT, ADAM
Address: 2250 LEE ROAD #101
City-St-Zip: WINTER PARK, FL 32789

Title: V ( ) Delete
Name: MELER, SPENCER S
Address: 2250 LEE ROAD #101
City-St-Zip: WINTER PARK, FL 32789

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: SEC (X) Change ( ) Addition
Name: ALSTOTT, ADAM
Address: 2550 LEE ROAD #101
City-St-Zip: WINTER PARK, FL 32789

Title: TRES ( ) Change (X) Addition
Name: ALSTOTT, ADAM
Address: 2250 LEE ROAD #101
City-St-Zip: WINTER PARK, FL 32789

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ADAM ALSTOTT P 03/22/2004

Electronic Signature of Signing Officer or Director Date