

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT  
CORPORATION  
ANNUAL REPORT  
1999



FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State  
DIVISION OF CORPORATIONS

FILED  
May 17, 1999 8:00 am  
Secretary of State

05-17-1999 90094 006 \*\*\*150.00

DOCUMENT # P95000060943

1. Corporation Name

CHAMP'S FAMILY POOLS, INC.

Principal Place of Business  
4171 NW 44 COURT  
LAUDERDALE LAKES FL 33319

Mailing Address  
4171 NW 44 COURT  
LAUDERDALE LAKES FL 33319

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

08/08/1995

4. FEI Number

65-0599904

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 owes the current year Intangible  
Personal Property Tax.

☐ Yes ☐ No

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

23 City & State

27 City & State

24 Zip

Country

28 Zip

Country

9. Name and Address of Current Registered Agent

MCINTOSH, THEOLA D  
4171 NW 44 COURT  
LAUDERDALE LAKES FL 33319

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

FL

85 Zip Code

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12.

OFFICERS AND DIRECTORS

TITLE D ☐ DELETE

NAME MCINTOSH, PATRICK W  
STREET ADDRESS 4171 NW 44 COURT  
CITY-ST-ZIP LAUDERDALE LAKES FL 33319

TITLE VP ☐ DELETE

NAME BEADLEY, JAMES IV  
STREET ADDRESS 4401 N.W. 36 STREET  
CITY-ST-ZIP LAUDERDALE LAKES FL 33319

TITLE C ☒ DELETE

NAME POMIER, MIKE  
STREET ADDRESS 671 S.W. 12 COURT  
CITY-ST-ZIP DEERFIELD BEACH FL 33441

TITLE P ☐ DELETE

NAME MCINTOSH, THEOLA D  
STREET ADDRESS 4171 NW 44 COURT  
CITY-ST-ZIP LAUDERDALE LAKES FL 33319

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE

☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE

☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE

☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Theola D. McIntosh / Theola D. McIntosh 4/15/99

Date

Daytime Phone #

954-4811 022

CR2E034 (11/98)