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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

1996

P95000073754 (0)

DOCUMENT # 1. Corporation Name SUN POWER SOLAR & POOL COMPANY



Principa! Place o	of Business	Mailing Address						
5828 BAHIA N SARASOTA F		5828 BAHIA VISTA DI SARASOTA FL 34232						
					3. Date Incorporated or Qualified 09/19/1995	3a. Date of	Last Rej	port
2. Principal Plac	ce of Business	2a. Mailing Address			4. FEI Number		A	pplied For
1	26				65-06167	89	N	ot Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.	L		5. Certificate of Status Desired			Additional
		27	i)		5. Certificate of Status Boshed		Fee R	equired
City & State		City & State	2.0.0		6. Election Campaign Financing	m		May Be
3		28	8		Trust Fund Contribution Added to Fees			
Zip	Country	Zip	Coun	itry	8. This corporation has liability for	intangible tax u	nder s	199.032,
4	25	29	30		Florida Statutes Yes 10. Name and Address of New F		3,8)
	9. Name and Address of Curre	ent Registered Agent		81 Name	10, Name and Address of New P	egistereo Ag	7411	
NOWAK, RICHARD H			82 Street Ac		ress (P.O. Box Number is Not Acceptal:	ole)		
	HIA VISTA DR.		-	B3				
SARASC)TA FL 34232		ł	53				
			ľ	84 City		E1	B5 Zip	Code
					ration submits this statement for the pu	FL	ing ite s	raietered offic
OLONIATUIDE	h, and accept the obligations of, Se			Agent signaturo require		DATE	v · · · · · ·	
12.	OFFICERS A	ND DIRECTORS	13.		ADDITIONS/CHANGES TO OFF			
TITLE	D	☐ DELETE	1.110	1LE	☐ Change		Addition	
NAME	NOWAK, RICHARD H		1.2 NA	ME				
Street Address	5828 BAHIA VISTA DR.		1.3 \$1	REET ADDRESS				
CITY-ST-ZIP	SARASOTA FL 34232			IY-ST-ZIP		r-3	Change	Addition
TITLE		☐ DETEJE	2 1 1 I			LJ	Guanye	L'I voguion
NAMÉ			2.2 NA					
STREET ADDRESS				REET ADDRESS				
CITY-ST-ZIP				TY-ST-ZIP			Change	Addition
TITLE		☐ DELETE	3 1 7			LJ	Change.	
NAME			3.2 NA					
STREET ADDRESS				TREET ADDRESS				
CITY-SI-ZIP		☐ DELETE	4. 1 Ti	TY-ST-ZIP		П	Change	[] Addition
TITLE	ļ		4.2 N				•	
NAME			- 1	REET ADDRESS				_
STREET ADDRESS				TY-ST-ZIP				
CITY S1. 7IP		DELETE	5 1 7				Change	☐ Addition
	1	L	5.2 N	AME				
NAME STREET ADORESS			5.3 S	TREET ADDRESS				
STREET ADDRESS				TREET ADDRESS . ITY-ST-ZIP				
STREET ADDRESS CITY-ST-ZIP		DELETE		ITY-ST-ZIP			Change	Addition
STREET ADDRESS CITY-ST-ZIP TITLE		☐ DELETE	5 4 CI	ITY-ST-ZIP ITLE			Change	Addition
STREET ADDRESS CITY-ST-ZIP TITLE NAME		☐ DELETE	5 4 Cl 6 1 T 6.2 N	ITY-ST-ZIP ITLE			Change	Addition
STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS		_	54CI 61T 62N 63S	ITY-ST-ZIP ITLE AME IRSET ADDRESS ITY-ST-ZIP	for the exemption stated in Section 11			

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 unde 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