2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P96000014651

1. Entity Name

BLUÉ IGUANA POOL AND SPA, INC.



FILED Feb 15, 2008 08:00 AM Secretary of State

Principal Place of Business

661 SEBASTIAN BLVD - STE C SEBASTIAN, FL 32958 Mailing Address

661 SEBASTIAN BLVD - STE C SEBASTIAN, FL 32958



DO NOT WRITE IN THIS SPACE

01212008 No Chg-P CR

CR2E034 (11/05)

4. FEI Number 65-0643487

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

ELSEBOUGH, KELLY A 149 MIDVALE TERRACE SEBASTIAN, FL 32958

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

DO NOT WRITE IN THIS SPACE

			IN THIS SPACE			
	named entity submits this statement for the pulions of registered agent.	urpose of changing its registere	d office or re	egistered agent, or bo	oth, in the State of Florida. I am familiar with, and accept	
SIGNATURE.	Signature, typed or printed name of registered egent and title if	applicable. (NOTE: Registered	Agent signature	required when reinstating)	DATE	
	E NOW!!! FEE IS \$150.00 ay 1, 2008 Fee will be \$550.00	Election Campaign Finance Trust Fund Contribution.	ening	\$5.00 May Be Added to Fees		
10.	OFFICERS AND DIREC	TORS				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PTD ELSEBOUGH, EDWARD C 149 MIDVALE TERRACE SEBASTIAN, FL 32958				UCOCCOCCO	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VSD ELSEBOUGH, KELLY A 149 MIDVALE TERRACE SEBASTIAN, FL 32958				U00000828788 02/26/08-80016-008 150.00	
TITLE NAME STREET ADDRESS CITY-ST-ZIP				DO	NOT WRITE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP				in '	THIS SPACE	
NAME STREET ADDRESS CITY-ST-ZIP					·	

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:	wel	· C	11	120.	EDWARL	<u>/</u>
-	SIGNATURE AN	ID TYPED OF	PRINTED N	AME OF SIGNIN	G OFFICER OR DIREC	TC

2/11/08 (-772)589-6854