

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

FILED
Jan 23 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Northam
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000056000 (8)

1. Corporation Name

POOL RESURFACING SYSTEMS, INC.



Principal Place of Business

7543 N. LEEWYNN DRIVE
SARASOTA FL 34240

Mailing Address

7543 N. LEEWYNN DRIVE
SARASOTA FL 34240-8793

2. Principal Place of Business

21 5426 Potter St
Suite, Apt. #, etc.

22 City & State
Sarasota FL

23 Zip
34232

24 Country
USA

2a. Mailing Address

26 5426 Potter St
Suite, Apt. #, etc.

27 City & State
Sarasota FL

28 Zip
34232

29 Country
USA

3. Date Incorporated or Qualified

06/28/1996

3a. Date of Last Report

4. FEI Number

65-0679694

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 has liability for intangible tax under s. 199.032,
Florida Statutes

Yes No

9. Name and Address of Current Registered Agent

TROYER, PAMELA
7543 N. LEEWYNN DRIVE
SARASOTA FL 34240

10. Name and Address of New Registered Agent

81 Name

Jon Yutzy

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

5426 Potter St

83

84 City

Sarasota

FL

85 Zip Code

34232

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: Jon Yutzy DATE: Jan. 14, 1997

12. OFFICERS AND DIRECTORS

TITLE: D
NAME: YUTZY, JON
STREET ADDRESS: 7543 N. LEEWYNN DRIVE
CITY-ST-ZIP: SARASOTA FL 34240

TITLE: ☐ DELETE
NAME:
STREET ADDRESS:
CITY-ST-ZIP:
☐ DELETE

TITLE: ☐ DELETE
NAME:
STREET ADDRESS:
CITY-ST-ZIP:
☐ DELETE

TITLE: ☐ DELETE
NAME:
STREET ADDRESS:
CITY-ST-ZIP:
☐ DELETE

TITLE: ☐ DELETE
NAME:
STREET ADDRESS:
CITY-ST-ZIP:
☐ DELETE

TITLE: ☐ DELETE
NAME:
STREET ADDRESS:
CITY-ST-ZIP:
☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE: ☒ Change ☐ Addition
1.2 NAME:
1.3 STREET ADDRESS: 5426 Potter St
1.4 CITY-ST-ZIP: Sarasota FL 34232

2.1 TITLE: ☐ Change ☐ Addition
2.2 NAME:
2.3 STREET ADDRESS:
2.4 CITY-ST-ZIP:
☐ Change ☐ Addition

3.1 TITLE: ☐ Change ☐ Addition
3.2 NAME:
3.3 STREET ADDRESS:
3.4 CITY-ST-ZIP:
☐ Change ☐ Addition

4.1 TITLE: ☐ Change ☐ Addition
4.2 NAME:
4.3 STREET ADDRESS:
4.4 CITY-ST-ZIP:
☐ Change ☐ Addition

5.1 TITLE: ☐ Change ☐ Addition
5.2 NAME:
5.3 STREET ADDRESS:
5.4 CITY-ST-ZIP:
☐ Change ☐ Addition

6.1 TITLE: ☐ Change ☐ Addition
6.2 NAME:
6.3 STREET ADDRESS:
6.4 CITY-ST-ZIP:
☐ Change ☐ Addition

14. I do 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.

SIGNATURE: Jon Yutzy DATE: Jan. 14, 1997

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

0435240

CR2E034 (9/96)