

**2005 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**May 02, 2005 8:00 am**  
**Secretary of State**

03-16-2005 90037 016 \*\*\*150.00

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                                                                                                                                          |                                                                                                              |                                                                                                                                                                                                   |                                                                                                                                                                      |  |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|
| <b>DOCUMENT # P97000004639</b><br>1. Entity Name<br><b>UNITED COMMUNITY POOL SERVICES, INC.</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                                                                                                                                          |                                                                                                              |                                                                                                                                                                                                   |                                                                                                                                                                      |  |
| Principal Place of Business<br><b>3300 UNIVERSITY DRIVE<br/>SUITE 405<br/>CORAL SPRINGS, FL 33065</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                                                                                                                          |                                                                                                              | Mailing Address<br><b>3300 UNIVERSITY DRIVE<br/>SUITE 405<br/>CORAL SPRINGS, FL 33065</b>                                                                                                         |                                                                                                                                                                      |  |
| 2. Principal Place of Business<br><b>11784 W Sample Road</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                                                                                                                          | 3. Mailing Address<br><b>11784 W Sample Road</b>                                                             |                                                                                                                                                                                                   |                                                                                                                                                                      |  |
| Suite, Apt. #, etc.<br>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                                                                                                                                          | Suite, Apt. #, etc.<br>                                                                                      |                                                                                                                                                                                                   |                                                                                                                                                                      |  |
| City & State<br><b>CORAL SPRINGS FL</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                                                                                                                                          | City & State<br><b>CORAL SPRINGS FL</b>                                                                      |                                                                                                                                                                                                   |                                                                                                                                                                      |  |
| Zip<br><b>33065</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                                                                                                                          | Country<br><b>USA</b>                                                                                        |                                                                                                                                                                                                   | Zip<br><b>33065</b>                                                                                                                                                  |  |
| Country<br><b>USA</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                                                                                                                          | Country<br><b>USA</b>                                                                                        |                                                                                                                                                                                                   |                                                                                                                                                                      |  |
| 4. FEI Number<br><b>65-0741791</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                                                                                                                          |                                                                                                              | Applied For<br><input type="checkbox"/> Not Applicable                                                                                                                                            |                                                                                                                                                                      |  |
| 5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                                                                                                                                          |                                                                                                              |                                                                                                                                                                                                   |                                                                                                                                                                      |  |
| 6. Name and Address of Current Registered Agent<br><br><b>MOSBERG, ANDREW<br/>3300 UNIVERSITY DRIVE<br/>SUITE 405<br/>CORAL SPRINGS, FL 33065</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                                                                                                                          |                                                                                                              | 7. Name and Address of New Registered Agent<br>Name<br><b>ANDREW MOSBERG</b><br>Street Address (P.O. Box Number is Not Acceptable)<br><b>11784 W SAMPLE ROAD</b><br><b>CORAL SPRINGS FL 33065</b> |                                                                                                                                                                      |  |
| 8. 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. I am familiar with, and accept the obligations of registered agent.                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                                                                                          |                                                                                                              |                                                                                                                                                                                                   |                                                                                                                                                                      |  |
| SIGNATURE _____ DATE _____<br><small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                                                                                                                                          |                                                                                                              |                                                                                                                                                                                                   |                                                                                                                                                                      |  |
| <b>FILE NOW!!! FEE IS \$150.00<br/>After May 1, 2005 Fee will be \$550.00</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                                                                                          | 9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees |                                                                                                                                                                                                   |                                                                                                                                                                      |  |
| 10. OFFICERS AND DIRECTORS                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                                                                                                                          |                                                                                                              | 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11                                                                                                                                             |                                                                                                                                                                      |  |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | P<br><b>SOLOMON, HOWARD</b><br><b>3300 UNIVERSITY DRIVE, SUITE 405</b><br><b>CORAL SPRINGS, FL 33065</b> <input type="checkbox"/> Delete |                                                                                                              | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                                                                                    | <b>SOLOMON, HOWARD</b><br><b>11784 W. SAMPLE ROAD</b><br><b>CORAL SPRINGS, FL 33065</b> <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |  |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | S<br><b>MOSBERG, ANDREW</b><br><b>3300 UNIVERSITY DRIVE, SUITE 405</b><br><b>CORAL SPRINGS, FL 33065</b> <input type="checkbox"/> Delete |                                                                                                              | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                                                                                    | <b>MOSBERG, ANDREW</b><br><b>11784 W. SAMPLE ROAD</b><br><b>CORAL SPRINGS, FL 33065</b> <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |  |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | <input type="checkbox"/> Delete                                                                                                          |                                                                                                              | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                                                                                    | <input type="checkbox"/> Change <input type="checkbox"/> Addition                                                                                                    |  |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | <input type="checkbox"/> Delete                                                                                                          |                                                                                                              | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                                                                                    | <input type="checkbox"/> Change <input type="checkbox"/> Addition                                                                                                    |  |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | <input type="checkbox"/> Delete                                                                                                          |                                                                                                              | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                                                                                    | <input type="checkbox"/> Change <input type="checkbox"/> Addition                                                                                                    |  |
| 12. 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 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 record 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: <b>ANDREW MOSBERG</b> 567 3/10/05 954-252-8119<br><small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                                                                                          |                                                                                                              |                                                                                                                                                                                                   |                                                                                                                                                                      |  |