

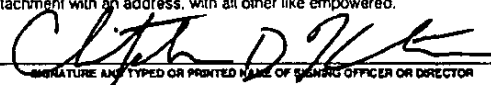


2005 FOR PROFIT CORPORATION ANNUAL REPORT

06-30-2005 90001 019 ***150.00
P97000031582

DOCUMENT # P97000031582 1. Entity Name MIDWEST POOL SERVICE, INC.					
Principal Place of Business 6607 32ND AVE. W. BRADENTON, FL 34209			Mailing Address P.O. BOX 7142 BRADENTON, FL 34210		
2. Principal Place of Business 2604 30th ST. W. Suite, Apt. #, etc.		3. Mailing Address 6023 26th ST. W. Suite, Apt. #, etc. #232		06262005 Chg-P CR2E034 (10/03)	
City & State BRADENTON, FL		City & State BRADENTON, FL		4. FEI Number 65-0746754	
Zip 34205 Country USA		Zip 34207 Country USA		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent KOESTER, DAVID J 6607 32ND AVE. W. BRADENTON, FL 34209				7. Name and Address of New Registered Agent Name CHRISTOPHER D. KOESTER Street Address (P.O. Box Number is Not Acceptable) 2604 30th ST. W. City BRADENTON FL Zip Code 34205	
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  CHRISTOPHER D. KOESTER, PRES 6/26/05 <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>					
FILE NOW!!! FEE IS \$150.00 Due by September 7, 2005		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees		In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.	
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PTD KOESTER, DAVID J 6607 32ND AVE. W. BRADENTON, FL 34209	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	PTD KOESTER, CHRISTOPHER D. 2604 30 th STREET WEST BRADENTON, FL 34205	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VSD KOESTER, DIANE K 6607 32ND AVE. W. BRADENTON, FL 34209	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP		<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP		<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY - ST - ZIP		<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS 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 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:  CHRISTOPHER D. KOESTER, PRES 6/26/05 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date</small>					

FILED

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA



941-228-6117