

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

FILED  
May 11 1998 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1998



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

DOCUMENT # P97000075371 (9)

1. Corporation Name

POOL AND PATIO WAREHOUSE, INC.



Principal Place of Business

756 BEACHLAND BOULEVARD  
VERO BEACH FL 32963

Mailing Address

756 BEACHLAND BOULEVARD  
VERO BEACH FL 32963

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

08/28/1997

4. FEI Number

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 owes or has paid the current year Intangible  
Personal Property Tax due June 30.

☐ Yes

☐ No

2. Principal Place of Business

2a. Mailing Address

21 1595 OLD DIXIE HWY

26 Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 City & State

23 VERO BEACH FL

24 Zip

32960

Country

25 USA

27 City & State

28 Zip

Country

29

30

9. Name and Address of Current Registered Agent

GARAVAGLIA, MICHAEL J  
756 BEACHLAND BOULEVARD  
VERO BEACH FL 32963

10. Name and Address of New Registered Agent

81 Name

PETER MARINI

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

1595 OLD DIXIE HWY

83

84

City VERO BEACH

FL

85 Zip Code

32960

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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

1/30/98

DATE

12. OFFICERS AND DIRECTORS

TITLE D  
NAME GARAVAGLIA, MICHAEL J  
STREET ADDRESS POST OFFICE BOX 3886 N/A  
CITY-ST-ZIP VERO BEACH FL 32964

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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CITY-ST-ZIP

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NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE Vice Pres, /Sec.  
1.2 NAME Peter Marini  
1.3 STREET ADDRESS 1595 OLD DIXIE HWY.  
1.4 CITY-ST-ZIP VERO BEACH, FL 32960

2.1 TITLE Pres, TREASURER  
2.2 NAME JOHN WOODS  
2.3 STREET ADDRESS 1595 OLD DIXIE HWY  
2.4 CITY-ST-ZIP VERO BEACH, FL 32960

3.1 TITLE  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP

4.1 TITLE  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP

5.1 TITLE  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

6.1 TITLE  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP

14. 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 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:

Michael J. Garavaglia

Peter Marini

John Woods

CR2E034 (10/97)