

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000078248

FILED
Mar 29, 2005
Secretary of State

Entity Name: NO PROBLEM POOLS & SPAS, INC.

Current Principal Place of Business:

1031 BLANDING BLVD.
STE 401
ORANGE PARK, FL 32065 US

New Principal Place of Business:

Current Mailing Address:

1031 BLANDING BLVD.
STE 401
ORANGE PARK, FL 32065 US

New Mailing Address:

FEI Number: 59-3466923 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PETTY, THERESA G
2201 MANGROVE LANE
GREEN COVE SPRINGS, FL 32043 US

Name and Address of New Registered Agent:

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.

SIGNATURE: _____

Electronic Signature of Registered Agent

_____ Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: PETTY, THERESA G
Address: 1255 CHAFFEE RD SOUTH
City-St-Zip: JACKSONVILLE, FL 32221

Title: VP () Delete
Name: PETTY, GEORGE R
Address: 1255 CHAFFEE RD SOUTH
City-St-Zip: JACKSONVILLE, FL 32221

Title: VP () Delete
Name: GREGORY, ROBERT
Address: 2555 MOODY RD.
City-St-Zip: ORANGE PARK, FL 32073

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: PETTY, THERESA G
Address: 2201 MANGROVE LANE
City-St-Zip: GREEN COVE SPRINGS, FL 32043

Title: VP (X) Change () Addition
Name: PETTY, GEORGE R
Address: 2201 MANGROVE LANE
City-St-Zip: GREEN COVE SPRINGS, FL 32043

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: KEITH MEHL

CONT

03/29/2005

Electronic Signature of Signing Officer or Director

_____ Date