

2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 10, 2007 8:00 am
Secretary of State

01-10-2007 90043 018 ***150.00

DOCUMENT # P98000000801

1. Entity Name
AQUA MARINE POOLS, INC.



Principal Place of Business
**1501 SE DECKER AVE.
#107
STUART, FL 34994 US**

Mailing Address
**1501 SE DECKER AVE.
#107
STUART, FL 34994 US**

40000703



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

01042007 Chg-P CR2E034 (12/06)

4. FEI Number
65-0816344

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**BROWN, RODDY
1202 SE NAPLES LANE
PORT SAINT LUCIE, FL 34952**

Name
BROWN, RODDY

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

2082 SE ELLINGTON TERR

City
PORT ST LUCIE

FL

Zip Code
34952

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

Roddy Brown **RODDY BROWN - PRESIDENT**

1-8-07

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**P
BROWN, RODDY
1202 SE NAPLES LANE
PORT SAINT LUCIE, FL 34952** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**VST
STEVENS, BLAISE A
1501 DECKER AVE.
STUART, FL 34994** ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**P
BROWN, RODDY
2082 SE ELLINGTON TERR
PORT ST LUCIE, FL 34952** ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

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☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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:

Roddy Brown **RODDY BROWN PRESIDENT**

1-8-07

772 781 3033

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #