2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 11, 2009
Secretary of State

DOCUMENT# P98000010896

Entity Name: TOP GUNN POOLS, INC.

Current Principal Place of Business:

1601 N HANNA RD
LUTZ, FL 33549

New Principal Place of Business:

16010 N HANNA RD
LUTZ, FL 33548

Current Mailing Address:

P.O. BOX 414
LUTZ, FL 33548

New Mailing Address:

FEI Number: 59-3491238 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

MULL, BOBBY D
1719 WALLACE RD
LUTZ, FL 33549 US

Name and Address of New Registered Agent:

MULL, BOBBY D JR
1719 WALLACE RD
LUTZ, FL 33549 US

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: BOBBY D. MULL 02/11/2009
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: D ( ) Delete
Name: MULL, BOBBY
Address: 1719 WALLACE RD
City-St-Zip: LUTZ, FL 33549

Title: D ( ) Delete
Name: MULL, YVONNE J
Address: 1719 WALLACE RD
City-St-Zip: LUTZ, FL 33549

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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: BOBBY D. MULL PRES 02/11/2009
Electronic Signature of Signing Officer or Director Date