2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P98000028800

Entity Name: POOL HOMES MANAGERS, INC.

FILED Apr 30, 2002 8:00 AM Secretary of State

Current Principal Place of Business: New Principal Place of Business:

5260 WEST IRLO BRONSON HWY 5260 WEST IRLO BRONSON HWY STE 118-120 STE 118

KISSIMMEE, FL 34746 KISSIMMEE, FL 34746

Current Mailing Address: New Mailing Address:

5260 WEST IRLO BRONSON HWY 5260 WEST IRLO BRONSON HWY

STE 118-120 STE 118

KISSIMMEE, FL 34746 KISSIMMEE, FL 34746

FEI Number: 59-3501002 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

JONES, MICHEAL B ESQ.
7652 ASHLEY PARK COURT
SUITE 300
ORLANDO, FL 32835

WRIGHT, MALCOLM J ESQ.
2701 SPIVEY LANE
ORLANDO, FL 32837

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: MALCOLM WRIGHT 04/30/2002

Electronic Signature of Registered Agent Date

This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so (X). Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS: ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PTD () Delete Title: () Change () Addition

Name: WRIGHT, MALCOLM J Name:
Address: 5260 WEST IRLO BRONSON HWY #118 Address:

City-St-Zip: KISSIMMEE, FL 34746 City-St-Zip:

Title: VSD () Delete Title: () Change () Addition

 Name:
 WRIGHT, GILLIAM M
 Name:

 Address:
 5260 WEST IRLO BRONSON HWY #118
 Address:

 City-St-Zip:
 KISSIMMEE, FL 34746
 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: MALCOLM WRIGHT P 04/30/2002