

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000003432

1. Entity Name

AMERICAN POOLS & SPAS, INC.

FILED

00 MAR 20 PM 4:16

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



DO NOT WRITE IN THIS SPACE

Principal Place of Business

Mailing Address

108 PARK PLACE BOULEVARD
KISSIMMEE FL 34741

108 PARK PLACE BOULEVARD
KISSIMMEE FL 34741-2319

2. Principal Place of Business

1521 N. Kelley Avenue

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Kissimmee, FL

City & State

4. FEI Number

59-3552812

Applied For

Not Applicable

Zip

34744

Country

Zip

Country

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

SWANN & HADLEY, P.A.
1031 W. MORSE BOULEVARD
SUITE 270
WINTER PARK FL 32789

Name

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

City

FL

Zip Code

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.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back)

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2000 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution.

☐

\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Delete
NAME D
STREET ADDRESS MCAULIFFE, TERENCE R
CITY-ST-ZIP 108 PARK PLACE BOULEVARD
KISSIMMEE FL 34741

TITLE ☐ Change ☒ Addition
NAME PRESIDENT
STREET ADDRESS EZZARD, MARK
CITY-ST-ZIP 108 PARK PLACE BLVD
KISSIMMEE FL 34741

TITLE ☐ Delete
NAME D
STREET ADDRESS SWANN, RICHARD R
CITY-ST-ZIP 108 PARK PLACE BOULEVARD
KISSIMMEE FL 34741

TITLE ☐ Change ☒ Addition
NAME VICE PRESIDENT
STREET ADDRESS GLANCE, GEORGE O III
CITY-ST-ZIP 108 PARK PLACE BLVD
KISSIMMEE FL 34741

TITLE ☐ Delete
NAME D
STREET ADDRESS FULLER, VICTOR
CITY-ST-ZIP 108 PARK PLACE BOULEVARD
KISSIMMEE FL 34741

TITLE ☐ Change ☒ Addition
NAME VICE PRESIDENT
STREET ADDRESS BRUNO, ROBERT A
CITY-ST-ZIP 108 PARK PLACE BLVD
KISSIMMEE FL 34741

TITLE ☐ Delete
NAME D
STREET ADDRESS MILLER, RODGER M
CITY-ST-ZIP 108 PARK PLACE BOULEVARD
KISSIMMEE FL 34741

TITLE ☐ Change ☒ Addition
NAME SECRETARY/TREASURER
STREET ADDRESS KOON, DAVID A
CITY-ST-ZIP 108 PARK PLACE BLVD
KISSIMMEE FL 34741

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

13. 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 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

David A. Koon

3/2/00

(407)422-5508

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/99)