## 2001 UNIFORM BUSINESS REPORT (UBR)

## FILED Apr 23, 2001 8:00 am Secretary of State DOCUMENT # P9900003432 1. Entity Name AMERICAN POOLS & SPAS, INC. 4-23-2001 90242 039 \*\*\*150.00 Mailing Address Principal Place of Business 1521 N. KELLEY AVENUE 1521 N. KELLEY AVENUE KISSIMMEE FL 34744 KISSIMMEE FL 34744 3. Mailing Address 2. Principal Place of Business DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For City & State 4. FEI Number City & State 59-3552812 Not Applicable \$8.75 Additional Country Zip Country Zip 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name SWANN & HADLEY, P.A. Street Address (P.O. Box Number is Not Acceptable) 1031 W. MORSE BOULEVARD SUITE 270 WINTER PARK FL 32789 Zip Code City FL 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 DATE (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable. FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After MAY 1, 2001 Fee will be \$550.00 Tax filing requirement and elects to do so. Added to Fees Trust Fund Contribution. Make Check Payable to Department of State (See criteria on back) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 12. 11. Addition Delete TITLE TITLE NAME MCAULIFFE, TERENCE R NAME STREET ADDRESS STREET ADDRESS 108 PARK PLACE BOULEVARD CITY-ST-ZIP CITY-ST-7/P KISSIMMEE FL 34741 ☐ Addition ☐ Change Delete TITLE SWANN, RICHARD R NAME NAME STREET ADDRESS 108 PARK PLACE BOULEVARD STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP KISSIMMEE FL 34741 Change ☐ Addition TITLE ☐ Delete NAME **FULLER, VICTOR** NAME STREET ADDRESS STREET ADDRESS 108 PARK PLACE BOULEVARD CITY-ST-ZIP CITY-ST-ZIP KISSIMMEE FL 34741 Change ☐ Addition TITLE TITLE ☐ Defete MILLER, RODGER M NAME NAME STREET ADDRESS 108 PARK PLACE BOULEVARD STREET ADDRESS CITY-ST-ZIE CITY-ST-ZIP KISSIMMEE FL 34741 ☐ Addition ☐ Change TITLE Delete THUE EZZARD, MARK NAME NAME STREET ADDRESS 108 PARK PLACE BLVD STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP KISSIMMEE FL 34741 Addition Change ST ☐ Delete TITLE TITLE KOON, DAVID A NAME NAME

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 trustoe 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 without address, with all other like empowered.

STREET ADDRESS

CITY-ST-ZİP

SIGNATURE:

108 PARK PLACE BLVD

KISSIMMEE FL 34741

STREET ADDRESS

City-St-7IP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

18/01