## 2003 UNIFORM BUSINESS REPORT (UBR)

## DOCUMENT# P99000026172

Entity Name: SPACECOAST POOL BUILDERS INC.

FILED May 01, 2003 Secretary of State

Current Principal Place of Business:			New Principal Place of Business:		
566 BART	ON BLVD				
#1 ROCKLED	GE, FL 32955				
Current Mailing Address:			New Mailing Address:		
_				ig Addiess.	
566 BART( #1	ON BLAD				
ROCKLED	GE, FL 32955				
FEI Number:	59-3562521	FEI Number Applied For ( ) FEI Num	mber Not Appli	icable ( ) Certificate of Status Desired ( )	
Name and	Address of C	urrent Registered Agent:	Name and	Address of New Registered Agent:	
DOUGLASS, MARK C 566 BARTON BLVD #1 ROCKLEDGE, FL 32955					
	named entity s of Florida.	submits this statement for the purpose o	of changing it	s registered office or registered agent, or both,	
SIGNATUF	RE:				
	Electron	ic Signature of Registered Agent		Date	
	S AND DIREC	Delete ARK	ADDITION: Title: Name: Address:	D (X) Change ( ) Addition DOUGLASS, MARK C 566 BARTON BLVD #1	
City-St-Zip:	MELBOURNE, I	FL 32935	City-St-Zip:	ROCKLEDGE, FL 32955 US	
Title: Name: Address: City-St-Zip:	()	Delete	Title: Name: Address: City-St-Zip:	P () Change (X) Addition DOUGLASS, MARK C 566 BARTON BLVD #1 ROCKLEDGE, FL 32955 US	
Title: Name: Address: City-St-Zip:	( )	Delete	Title: Name: Address: City-St-Zip:	VP () Change (X) Addition DOUGLASS, KELLEY S 566 BARTON BLVD #1 ROCKLEDGE, FL 32955 US	
Title: Name: Address: City-St-Zip:	()	Delete	Title: Name: Address: City-St-Zip:	S () Change (X) Addition DOUGLASS, KELLEY S 566 BARTON BLVD #1 ROCKLEDGE, FL 32955 US	
Title: Name: Address: City-St-Zip:	( )	Delete	Title: Name: Address: City-St-Zip:	T () Change (X) Addition RANDALL, DAVID 566 BARTON BLVD #1 ROCKLEDGE, FL 32955 US	
Title: Name: Address: City-St-Zip:	()	Delete	Title: Name: Address: City-St-Zip:	VP () Change (X) Addition RANDALL, DAVID 566 BARTON BLVD #1 ROCKLEDGE, FL 32955 US	

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: MARK DOUGLASS DP 05/01/2003