P99000071793

1. Entity Name

DOCUMENT#

AQUA FRESH POOLS & SERVICE, INC.

Principal Place of Business 500 PATRICIA AVENUE FRUITLAND PARK FL 34731

Mailing Address

POST OFFICE BOX 492054 LEESBURG FL 34749-2054

2. Principal Place of Business	3. Mailing Address
16955 SE 173rd Terrace Road	P.O. Box 129
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Weirsdale, Florida	Weirsdale, Florida
Zip Country	Zip Country
32195 Marion	32195 Marion
6. Name and Address of Current F	Registered Agent

FILED Jul 22, 2002 8:00 am Secretary of State 07-22-2002 90159 003 ***150.00



Suite, Apt. #, etc.	3rd Terrace Road	Suite, Apt. #, etc.			DO NOT WRITE IN THIS SPACE			
City & State Weirsdale,	Florida	City & State Weirsdale, Florida		4. 1	59-3597876		applied For lot Applicable	
Zip 32195	Country	Zip 32195	Country Marion	5(Certificate of Status Desired	\$8.75 Ac	ditional	
	Name and Address of Current Re			7. 1	Name and Address of New Registe	red Agent		
RICHEY, STEVEN J RICHEY & CRAWFORD, P.A. 1009 NORTH FOURTEENTH STREET LEESBURG FL 34749-2460			Name Street Address (P.O. Box Number is Not Acceptable) 601 S 9th Street					
		1 /	esburg	<u>.</u> i	FL Zip Cod 347			
the obligations of SIGNATURE	d entity submits this statement for the registered agent. re, typed or printed name of registered agent and t			registered ag	ent, or both, in the State of Florida.			
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 \$550.00 After September 13, 2002 Fee will be \$750.00 Make Check Payable to Department of State		\$750.00	Election Campaign Financing Trust Fund Contribution.		00 May Be d to Fees			
. 11.	OFFICERS AND DIF	ECTORS	12.	AD	DITIONS/CHANGES TO OFFICERS	AND DIRECTOR	RS IN 11	
STREET ADDRESS 500	DLEY, DAN THOMAS PATRICIA AVENUE ITLAND PARK FL 34731	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Change	Addition	
STREET ADDRESS 500	DLEY, DARLENE F PATRICIA AVENUE ITLAND: PARK: FL: 34731.	☐ Delete	TITLE NAME STREET ADDRESS GCITY_ST-ZIP	to make the second of	The second control of	☐ Change	☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	,,,,,,	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Change	☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	***************************************		☐ Change	☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-SI-ZIP		19.07(3)(i), Florida Statutes. I further	☐ Change	☐ Addition	

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 attachmen with an address, with all other like empowered.

SIGNATURE:

Attachment

July 16, 20

#P9900071793

OLS & SERVICE

July 16, 2002

Dear Sir or Madam,

I called into your office and told the lady who answereed the phone that this was the first time we had received this form. Our mailing address as well as our registered agents had changed. She said to send a check for the normal amount of \$150.00 and to make the address changes on the form and return it in the provided envelope. Thank you for your coperation in this matter.

adley, President Dan T. Bradley, President

dba/ Aqua Fresh Pools & Service, Inc.