FROM : JOES TAX SERVICE INC FAX NO. : 863 688 3141

FILED
May 04, 2005 8:00 am
Secretary of State
05-04-2005 90111 028 ***150.00

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P99000072112

1. Entity Name
BLUE BRIGHT POOLS, INC

Principal Place of Business
172 SUNRISE HILL W
AUBURNDALE, FL 33823

Mailing Address
P.O. BOX 1098
AUBURNDALE, FL 33823

14016620

DO NOT WRITE IN THIS SPACE

04282005 No Chg-P CR2E034 (10/03)

4. FEI Number
59-3593038

Applied For
Not Applicable

5. Certificate of Status Desired ☐ $8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

DUFFEY, CHRIS A
172 SUNRISE HILL W
AUBURNDALE, FL 33823

DO NOT WRITE IN THIS SPACE

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE ______

FILE NOW!! FEE IS $150.00
After May 1, 2005 Fee will be $550.00

9. Election Campaign Financing Trust Fund Contribution. ☐ $5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	D
NAME	DUFFEY, CHRIS A
STREET ADDRESS	~~1844 BISHOPS GATE~~ 172 SUNRISE HILL W
CITY-ST-ZIP	~~WINTER HAVEN, FL 33880~~ AUBURNDALE FL 33823
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
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CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

DO NOT WRITE IN THIS SPACE

11. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Chris Duffey CHRIS DUFFEY 4-28-05 863-412-8570
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

Questions?
Phone: (850) 245-6056
Hearing/Voice Impaired may call (850) 245-6096 (TDD)