

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000083460

Entity Name: POE'S POOL PREPS, INC.

FILED  
Apr 30, 2009  
Secretary of State

## Current Principal Place of Business:

17278 MURCOTT BLVD  
LOXAHATCHEE, FL 33470 US

## New Principal Place of Business:

## Current Mailing Address:

17278 MURCOTT BLVD  
LOXAHATCHEE, FL 33470 US

## New Mailing Address:

FEI Number: 65-0985056

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

POE, BRAD  
17278 MURCOTT BLVD  
LOXAHATCHEE, FL 33470 US

## Name and Address of New Registered Agent:

POE, BRAD T  
17278 MURCOTT BLVD  
LOXAHATCHEE, FL 33470 US

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: BRAD POE

04/30/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: POE, BRADLEY T  
Address: 17278 MURCOTT BLVD  
City-St-Zip: LOXAHATCHEE, FL 33470

Title: V ( ) Delete  
Name: POE, BROOKE  
Address: 17278 MURCOTT BLVD  
City-St-Zip: LOXAHATCHEE, FL 33470

Title: OF ( ) Delete  
Name: POE, THOMAS J  
Address: 17278 MURCOTT BLVD  
City-St-Zip: LOXAHATCHEE, FL 33470 US

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: BRAD POE

BP

04/30/2009

Electronic Signature of Signing Officer or Director

Date