

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000099967

Entity Name: AUTHENTIC POOLS & SPAS, INC.

FILED  
May 08, 2007  
Secretary of State

## Current Principal Place of Business:

91 S SCHOOL AVE  
LECANTO, FL 34461

## New Principal Place of Business:

641 E. GULF TO LAKE HWY  
LECANTO, FL 34461

## Current Mailing Address:

91 S SCHOOL AVE  
LECANTO, FL 34461

## New Mailing Address:

641 E. GULF TO LAKE HWY  
LECANTO, FL 34461

FEI Number: 52-2203415

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

MANNIS, MICHAEL L  
91 S SCHOOL AVE  
LECANTO, FL 34461 US

## Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: MANNIS, MICHAEL L  
Address: 91 S SCHOOL AVE  
City-St-Zip: LECANTO, FL 34461

Title: D ( ) Delete  
Name: MANNIS, KAREN L  
Address: 91 S SCHOOL AVE  
City-St-Zip: LECANTO, FL 34461

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: KAREN L MANNIS

TREA

05/08/2007

Electronic Signature of Signing Officer or Director

Date