

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P99000108042

FILED
Sep 13, 2002
Secretary of State

Entity Name: AQUA VISTA CUSTOM POOLS & SPAS, INC.

Current Principal Place of Business:

7952 NORMANDY BLVD.
JACKSONVILLE, FL 32221

New Principal Place of Business:

7952 NORMANDY BLVD.
SUITE 10
JACKSONVILLE, FL 32221

Current Mailing Address:

7952 NORMANDY BLVD.
JACKSONVILLE, FL 32221

New Mailing Address:

7952 NORMANDY BLVD.
SUITE 10
JACKSONVILLE, FL 32221

FEI Number: 59-3323685

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

BENSON, GARY A
2955 HARTLEY ROAD
SUITE 101
JACKSONVILLE, FL 32257 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

This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so (X).

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DPS () Delete
Name: WILLIAMSON, DAVID M JR.
Address: 9027 SANDLER ROAD
City-St-Zip: JACKSONVILLE, FL 32222

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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: DAVID M WILLIAMSON JR.

DPS

09/13/2002

Electronic Signature of Signing Officer or Director

_____ Date