COND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 15, 1999.

MOUNT DUE ON OR BEFORE 09/15/99: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

Sep 07, 1999 8:00 am Secretary of State

09-07-1999 90003 016 ***550.00

FILED

Corporation Name \$25704

BAUMGARDNER POOLS, INC

ncipal Place of Business	Mailing Address	
13 ANADALE CIRCLE ANDON FL 33511	3013 ANADÀLE CIRCLE BRANDON FL 33511	



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

01/17/1991

Sulle, Apt. #, etc. Status Desired Statu	Principal Place of Business		2a. Mailing Address				4. FEI Number		Applied For			
City & State Ci			26			59-3046718	^1	Not Applicable				
City & State City & State City & City & State City & C	Suite, Apt. #, etc. Suite, Apt. #, etc.							- 🗆				
Zip Country Zip	City & State City & State											
9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 11. Name and Address of New Registered Agent 12. Name and Address of New Registered Agent 13. Name and Address of New Registered Agent 14. Name 15. Name 16. Name and Address of New Registered Agent 15. Name 16. Name and Address of New Registered Agent 16. Name and Address of New Registered Agent 17. Name and Address of New Registered Agent 18. Name 18. Name 18. Name 18. Name 18. Name 18. Street Address (P.O. Box Number is Not Acceptable) 18. Address (P.O. Box Number is Not Acceptable) 19. Address (P.O. Box Number is Not Acceptable) 19. Address (P.O. Box N	7in	Country		Cou	ntry	•		ent vear				
9. Name and Address of Current Registered Agent BAUMGARDNER, ADRIENNE J. 3013 ANNADALE CIRCLE BRANDON FL 33511 B4 City FL 85 Zip Code Pursuant to the provisions of sections 607,0502 and 607,1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Stoch change was authorized by the corporation's board of directors. I hereby accept the obligations of, section 607,050, Florida Statutes. NATURE Supulars, typed or printed sum of requisered agent and tills if application. PD BAUMGARDNER, ELDON ET ACROSS STATE BRANDON FL STATE DELETE 13 TIRLE 10 Change Addition ET ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 21 TIRLE 22 TIRLE 23 STREET ADDRESS 3013 ANNADALE CIRCLE 33 TIRLE 24 CITYST2P DELETE 41 TIRLE 24 CITYST2P DELETE 41 TIRLE 41 Change Addition ET ADDRESS 313 ANNADALE CIRCLE 33 TIRLE 34 CITYST2P DELETE 41 TIRLE 41 Change Addition ET ADDRESS 34 CITYST2P 41 TIRLE 41 Change Addition ET ADDRESS 35 TIRLE 51 TIRLE 51 TIRLE 51 Change Addition ET ADDRESS 45 CITYST3 P Change Addition ET ADDRESS 45 CITYST3 P 55 CITYST3 P 56 Change Addition ET ADDRESS 55 CITYST3 P 56 Change Addition 57 Change Addition 57 Change Addition 57 Change Addition 58 CITYST3 P 51 Change Addition 52 NAME 53 STREET ADDRESS 54 CITYST3 P 55 CITYST3 P 55 CITYST3 P 56 Change Addition 57 Change Addition 57 Change Addition 57 Change Addition 58 CITYST3 P 58 CITYST3 P 59 CHANGES 59 CITYST3 P 50 Change Addition 50 Change Addition 50 Change Addition 50 Change Addition 51 Change Addition 51 Change Addition 51 Change Addition 52 NAME 53 STREET ADDRESS 54 CITYST3 P 55 CITYST3 P 56 CITYST3 P 57 Change Addition 57 Change Addition 59 CANST CITYST3 P 50 Change Addition 51 Change Addition 51 Change Addition 52 NAME 53 STREET ADDRESS 54 CITYST3 P	- -P	— ·	⊢ .	30	•				Yes [No		
BAUMGARDNER, ADRIENNE J. 3013 ANNADALE CIRCLE BRANDON FL 33511 82 Street Address (P.O. Box Number is Not Acceptable) 83 Street Address (P.O. Box Number is Not Acceptable) 84 City FL S Zip Code Pursuant to the provisions of sections 607,0502 and 607,1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, and an advantagement of the provisions of sections 607,0508, Florida Statutes. 8A City FL S Zip Code Pursuant to the provisions of sections 607,0502 and 607,1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent and statutes. 8A City FL S Zip Code Pursuant to the provisions of sections 607,0508, Florida Statutes. 8A City FL S Zip Code Pursuant to the provisions of sections 607,0508, Florida Statutes. 8A City FL S Zip Code Pursuant to the provisions of sections 607,0508, Florida Statutes. 8A City FL S Zip Code Pursuant to the provisions of sections 607,0508, Florida Statutes. 8A City FL S Zip Code Pursuant to the provisions of sections 607,0508, Florida Statutes. 8A City FL S Zip Code Pursuant to the provisions of sections 607,0508, Florida Statutes. 8A City FL S Zip Code Pursuant to the provisions of sections 607,0508, Florida Statutes. 8A City FL S Zip Code Pursuant to the provisions of sections 607,0508, Florida Statutes. 8A City Title Supmary to provisions of sections 607,0508, Florida Statutes. 8A City Title Supmary to provisions of sections 607,0508, Florida Statutes. 8A City Title Supmary to provisions of sections 607,0508, Florida Statutes. 8A City Title Supmary to provisions of sections 607,0508, Florida Statutes. 8A City Title Supmary to provisions of sections 607,0508, Florida Statutes. 8A City Title Supmary to provisions of sections 607,0508, Florida Statutes. 8A City Title Supmary to provisions for provisions for provisions for provisions for provisions for provisions for provis				11			10. Name and Address of New R	egistered /	\gent			
3013 ANNADALE CIRCLE BRANDON FL 33511 Pursuant to the provisions of sections 607,0502 and 607,1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing lits registered agent, or both, in the State of Florida. Such change was authorabed by the corporation's board of directors. I hereby accept the appointment as registered agent, and accept the obligations of, section 607,0508, Florida Statutes, the above-named corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, section 607,0508, Florida Statutes NATURE OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 E PD BAUMGARDER, ELDON EFFACORESS 3013 ANADALE CIRCLE STZPB BRANDON FL 12 NAME 14 CITYSTZP DELETE 14 CITYSTZP DELETE 23 STREET ADDRESS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 E VD D DELETE 24 TITLE Change Addition Addition E BAUMGARDNER, ADRIENNE J. 23 STREET ADDRESS STZPB DELETE 33 STREET ADDRESS 44 CITYSTZP DELETE 51 TITLE Change Addition Change Addition E ACTIVSTZP DELETE 51 TITLE Change Addition Change Addition E STANDESS STZPB DELETE 51 TITLE Change Addition Change Addition E STANDESS STZPB DELETE 51 TITLE Change Addition Change Addition E STANDESS STZPB DELETE 51 TITLE Change Addition Change Addition E STANDESS STZPB DELETE 51 TITLE Change Addition Change Addition E STANDESS STZPB DELETE 51 TITLE Change Addition Change Addition E STANDESS STZPB DELETE 51 TITLE Change Addition Change Addition E STANDESS SACTIVSTZPP Change Addition Change Addition E STANDESS SACTIVSTZPP DELETE 51 TITLE Change Addition Change Addition E STANDESS SACTIVSTZPP STREET ADDRESS SACTIVSTZPP S					81	Name						
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Pursuant to the provisions of sections 607 (500 and 607 1508, Florida Statutes, the above-named corporation submitts this statement for the purpose of changing its registered agent, or both, in the State of Florida, Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, in an familiar with, and accept the obligations of, section 607 (505, Florida Statutes). NATURE NATURE	BRA	INDON FL 33511			83							
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Signature, typed or printed name of regulared agent and title if applicable. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 PD	office or r agent. I a	registered agent or both in the State (nt Fiorida. Stich change was a	aumonzec	יענונו	ine corporatio	ation submits this statement for the pun's board of directors. I hereby accept	rpose of chi t the appoir	anging its i itment as i	registere registere	d d	
PD	SNATURE.	Signature, typed or printed name of registered agent	and title if applicable. (No	OTE: Register	red Aç	gent signature requir	red when reinstating)	DATE				
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STZIP 64 CITY-ST-ZIP 6.4 CITY-ST-ZIP 1.5 the information supplied with this filling does not qualify for the exemption stated in section 119 07(3)(i). Florida Statutes 1 further certify that the information	<u> </u>										}	
	ST-ZIP	ertify that the information cumplied with	this filing does not qualify for t	he evemo	Y-ST-	stated in section	on 119 07(3)(i). Florida Statutes I fur	her certify t	nat the info	ormation		

Increase certify that the information supplied with this filling does not qualify for the exemption stated in section 19.07(3)(f), Florida Statutes. Further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

IGNATURE

LISTONIAN G-1-99 813-654-6888