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PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **S52512** (8)

1. Corporation Name

TERRY'S POOL SERVICE, INC.



Principal Place of Business

**335 N.E. 28 TERRACE
BOCA RATON FL 33431**

Mailing Address

**335 N.E. 28 TERRACE
BOCA RATON FL 33431**

3. Date Incorporated or Qualified
05/13/1991

3a. Date of Last Report
05/01/1995

2. Principal Place of Business

2a. Mailing Address

21 **16728 BARCELONA CT.**

26 **16728 BARCELONA CT**

4. FEI Number
65-0262377

Applied For
Not Applicable

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 **Delray Beach,**

27 **Delray Beach**

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

City & State

City & State

23 **Florida**

28 **FL**

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

Zip

Country

Zip

Country

24 **33484**

25

29 **33484**

30

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**MAUK, TERRY RAY
335 N.E. 28 TERRACE
BOCA RATON FL 33431**

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. 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. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature typed or printed name of registered agent and state of residence

Signature typed or printed name of officer or director and state of residence

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE ☐ DELETE

1. TITLE ☐ Change ☐ Addition

NAME **D MAUK, TERRY RAY**

STREET ADDRESS **335 N.E. 28 TERRACE**

CITY - ST - ZIP **BOCA RATON FL**

TITLE ☐ DELETE

2. TITLE ☐ Change ☐ Addition

NAME **S HOGAN, TIM**

STREET ADDRESS **1298 SW 16 STREET**

CITY - ST - ZIP **BOCA RATON FL**

TITLE ☐ DELETE

3. TITLE ☐ Change ☐ Addition

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE ☐ DELETE

4. TITLE ☐ Change ☐ Addition

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE ☐ DELETE

5. TITLE ☐ Change ☐ Addition

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE ☐ DELETE

6. TITLE ☐ Change ☐ Addition

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE ☐ DELETE

7. TITLE ☐ Change ☐ Addition

NAME

STREET ADDRESS

CITY - ST - ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I 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.

SIGNATURE: **TERRY RAY MAUK**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Terry R. Mauk

5/13/96

407 495 4111

CR2E034 (12/95)