FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

FILED Aug 20 1997 8:00am **PROFIT** FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham Secretary of State ANNUAL REPORT Secretary of State 1997 DIVISION OF CORPORATIONS DOCUMENT # S52512 (8)TERRY'S POOL SERVICE, INC. Principal Place of Business Mailing Address 16728 BARCELONA COURT 16728 BARCELONA COURT **DELRAY BEACH FL 33484** DELRAY BEACH FL 33484-8340 3. Date Incorporated or Qualified Date of Last Report 05/13/1991 05/17/1996 Principal Place of Business Mailing Address FEI Number Applied For 65-0262377 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional Certificate of Status Desired Fee Required 27 6. Election Campaign Financing City & State City & State \$5.00 May Be Trust Fund Contribution 23 28 Added to Fees Zip Country Zip. Country This corporation has liability for intangible tax under s. 199,032, X Yes No 24 25 29 30 Florida Statutes 9. Name and Address of Current Registered Agent Name and Address of New Registered Agent 81 Name MAUK, TERRY RAY 335 N.E. 28 TERRACE 82 Street Address (P.O. Box Number is Not Acceptable) 16728 BARCELONA COURT **BOCA RATON FL 33431** 84 Zip Code 33484 DELRAY BEACH Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submills 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 title if applicable (NOTE: Registered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS 13. (96/6)TITLE D DELETE 11 TITLE K Change Addition NAME MAUK, TERRY RAY 1.2 NAME CR2E034 **335 N.E. 28 TERRACE** 16728 BARCELONA COURT STREET ADDRESS 1.3 STREET ADDRESS **BOCA RATON FL** DELRAY BEACH, FL 33484 CITY-ST-ZIP 1.4 CITY - ST - ZIP DELETE Change Addition 2.1 TITLE TITLE HOGAN, TIM 2.2 NAME **1298 SW 16 STREET** STREET ADDRESS 2.3 STREET ADDRESS **BOCA RATON FL** CITY-ST-ZIP 2.4 CITY-ST-ZIP DELETE Change Addition TITLE 3.1 TITLE 3.2 NAME NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY - \$1 - 2IP DELETE Change Addition TITLE 4.1 Title NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY - ST - 7IP DELETE Change Addition TITLE 5.1 TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS

6.4 CITY - ST - ZIP I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 12.11 changed, or on an attachment with an address.

5.4 CITY - ST - ZIP

6.3 STREET ADDRESS

6.1 TITLE

6.2 NAME

DELETE

Mach

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

Change

Addition