

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S62145

FILED
Jan 05, 2011
Secretary of State

Entity Name: POOL DOCTOR SERVICE & SUPPLIES, INC.

Current Principal Place of Business:

2104 DEL PRADO BLVD S
CAPE CORAL, FL 33990 US

New Principal Place of Business:

Current Mailing Address:

2104 DEL PRADO BLVD S
CAPE CORAL, FL 33990 US

New Mailing Address:

FEI Number: 59-3081132

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

FORSTER, MARK E
2209 SE 32ND TERRACE
CAPE CORAL, FL 33904 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

OFFICERS AND DIRECTORS:

Title: DPS
Name: FORSTER, MARK E
Address: 2209 SE 32ND TERRACE
City-St-Zip: CAPE CORAL, FL 33904

Title: DVPT
Name: FORSTER, BARBARA N
Address: 2209 SE 32ND TERRACE
City-St-Zip: CAPE CORAL, FL 33904

I hereby 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 all other like empowered.

SIGNATURE: MARK E. FORSTER

PRES

01/05/2011

_____ Electronic Signature of Signing Officer or Director

_____ Date