## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S70721

FILED Apr 10, 2006 Secretary of State

Entity Name: THE POOL DOCTOR OF CENTRAL FLORIDA, INC.

**Current Principal Place of Business: New Principal Place of Business:** 6227 147 AVE N. 13831 US HIGHWAY 19 N CLEARWATER, FL 33764 SUITE B US CLEARWATER, FL 33760 US **New Mailing Address: Current Mailing Address:** P.O. BOX 17058 CLEARWATER, FL 33762 US FEI Number: 59-3078104 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of New Registered Agent: Name and Address of Current Registered Agent: LONG, DARELL LONG, DARELL 6227 147 AVENUE N. SUITE B 13831 US HIGHWAY 19 N. CLEARWATER, FL 33760 CLEARWATER, FL 33764 US 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: DARELL LONG 04/10/2006 Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution ( ). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: () Change () Addition LONG, DARELL Name: Name: PO BOX 17058 Address: Address: City-St-Zip: CLEARWATER, FL 33760 City-St-Zip: Title: Title: () Delete () Change () Addition Name: NAY, DENA Name: 4211 MEADOW WOOD LANE Address: Address: UNION TOWN, OH City-St-Zip: City-St-Zip: Title: ( ) Delete Title: () Change () Addition CAIN, DOROTHY Name: Name: 2087 DRUID ROAD Address: Address: City-St-Zip: CLEARWATER, FL 33764 City-St-Zip: Title: VΡ () Delete Title: (X) Change ( ) Addition LONG, TRACI LONG, DAVID G Name: Name: Address: PO BOX 17058 Address: 10215 NORTH PARK AVE City-St-Zip: CLEARWATER, FL 33760 City-St-Zip: KANSAS CITY, MO 64155

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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: DARELL LONG PRES 04/10/2006