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

PROFIT CORPORATION ANNUAL REPORT 1998

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FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS**

FILED
Feb 26 1998 8:00am
Secretary of State

s. corporation	MENT # V1993 POOL SUPPLIES, INC.	9 (0)							
Principal Place of Business Mailing Address						{	OFFICE STATE		
7223 FOREST OAKS BLVD SPRINGHILL FL 34806 US		7223 FOREST OAKS BLVD STE E SPRING HILL FL 34606 US				DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified			
						03/09/1992			
2. Principal Place of Business 2a. Mailing Address						4. FEI Number		oplied For	
21 26 Suite, Apt. #, etc. Suite, Apt. #, etc.						59-3111324		ot Applicable	
22 27			ыс.			5. Certificate of Status Desired	\$8.75 / Fee Re		
City & Stat	State City & State					Election Campaign Financing Trust Fund Contribution	\$5.00 Added t		
Zip	Country 25	Zip 29				This corporation owes or has paid the cu Personal Property Tax due June 30.		angible No	
9. Name and Address of Current Registered Agent						10. Name and Address of New Registered	Agent		
FALKNER, JOYCE 4420 LAKE IN THE WOODS DR SPRING HILL FL 34607				81 82 83 84	Name Street Addr	Address (P.O. Box Number is Not Acceptable)			
11. Pursuant office or agent. I a	registered agent, or both, in the State am familiar with, and accept the oblig	e of Florida. Such change w gations of, Section 607.0505	as authorize , Florida Stat	d by tutes.	the corporat	oration submits this statement for the purpose of ion's board of directors. I hereby accept the app	f changing it	s registered registered	
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registerer					t signature requir	ed when reinstating) DATE	0.0550505	0.11.40	
12.	OFFICERS AND DIRECTORS DELETE		13.	TL C		ADDITIONS/CHANGES TO OFFICERS AN	Change	Addition	
NAME STREET ADDRESS CITY-ST-ZIP	FALKNER, JOYCE A. 4420 LK IN THE WOODS DR SPRING HILL FL		1.2 N/ 1.3 ST	ME	DDRESS				
TITLE	VP	☐ DELETE	2.1 70				Change	Addition	
NAME	FERRARA, JOHN J		2.2 NJ	2.2 NAME				[
STREET ADDRESS	7255 FOREST OAKS BLVD		2.3 \$1	REET A	DDRESS				
CITY-ST-ZIP	SPRING HILL FL		2.4 C	ITY-ST	- ZIP				
TITLE		☐ DELETE	3.1 Til				Change	☐ Addition	
NAME			3.2 NA					İ	
STREET ADDRESS					DDRESS			j	
CITY-ST-ZIP		T DELETE		TY-ST	- ZIP	·- <u></u>	Change	Addition	
TITLE		☐ DELETE	4.1 TO	LE			CHININGS.	L. AUGILIUM	

CITY-ST-ZIP 14. I 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 eath; 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.

4.3 STREET ADDRESS

5.3 STREET ADDRESS

6.3 STREET ADDRESS

5.4 CITY-ST-ZIP

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

6.1 TITLE

6.2 NAME

SIGNATURE:

STREET ADDRESS

STREET ADDRESS

STREET ADORESS

CITY-ST-ZIP

CITY-ST-ZIP

NAME

TITLE

NAME

DELETE

DELETE

1/31/98

(352)683-2818

Change

Change

Addition

Addition