

2000 UNIFORM BUSINESS REPORT (UBR)

Rel 150. - CK 9127 4/28/00

DOCUMENT # V56397

1. Entity Name

ROBERT'S POOL DESIGN, INC.

Principal Place of Business

Mailing Address

4897 JOG RD
SUITE 117
LAKE WORTH FL 33467

4897 JOG RD
SUITE 117
LAKE WORTH FL 33467-5052

2. Principal Place of Business

3. Mailing Address

3230 Pebble Beach Dr
Suite, Apt. #, etc.

7765 LAKE WORTH RD PMB 314
Suite, Apt. #, etc.

City & State

City & State

LAKE WORTH FL

LAKE WORTH, FL

4. FEI Number

65-0350863

Amended For
Use Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

MONESCALCHI, RICHARD J.
75556 LAKE WORTH RD
SUITE 102
LAKE WORTH FL 33467

Name

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

City

FL

Zip Code

8. 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

Signature of person or persons of registered agent and the corporation

STATE Registered Agent or person or persons of the corporation

DATE

9. This corporation is eligible to satisfy its intangible
tax filing requirement and elects to do so.
(See criteria on back)

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2000 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution

\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS (SEE 11)

NAME	D	MACINTYRE, ROBERT H.	☒ Delete
STREET ADDRESS		4897 JOG ROAD, #117	
CITY-STATE-ZIP		LAKE WORTH FL	
NAME	P	EDWARDS, ELIZABETH E.	☐ Delete
STREET ADDRESS		4897 JOG RD. #117	
CITY-STATE-ZIP		LAKE WORTH FL	
NAME	VP	JOSEPH L. NAVARRO	☐ Delete
STREET ADDRESS		3230 Pebble Beach Dr	
CITY-STATE-ZIP		LAKE WORTH, FL 33467	
NAME			☐ Delete
STREET ADDRESS			
CITY-STATE-ZIP			
NAME			☐ Delete
STREET ADDRESS			
CITY-STATE-ZIP			
NAME			☐ Delete
STREET ADDRESS			
CITY-STATE-ZIP			

NAME			☐ Change ☐ Addition
STREET ADDRESS			
CITY-STATE-ZIP			
NAME			☐ Change ☐ Addition
STREET ADDRESS			
CITY-STATE-ZIP			
NAME			☐ Change ☐ Addition
STREET ADDRESS			
CITY-STATE-ZIP			
NAME			☐ Change ☐ Addition
STREET ADDRESS			
CITY-STATE-ZIP			

13. I hereby certify that the information supplied with this filing does not qualify for the exemption of corporations or other entities from the filing of this report or supplemental 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 407, Florida Statutes, and that my name appears on Block 11 of this report, or on an attachment with an address, with all other like empowered

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

FILED

01 SEP 27 PM 2:25

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



DO NOT WRITE IN THIS SPACE

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****550.00 ****550.00

☒ Change ☐ Addition

3230 Pebble Beach Dr
LAKE WORTH, FL 33467

☐ Change ☐ Addition

LS

9/26/01 561-329-0132

4-20-00 561-641-5102