

# **2008 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

DOCUMENT# V56397

Entity Name: ROBERT'S POOL DESIGN, INC.

**FILED**  
**Apr 24, 2008**  
**Secretary of State**

**Current Principal Place of Business:**

6010 YUCCA DR.  
FORT PIERCE, FL 34982 US

**New Principal Place of Business:**

**Current Mailing Address:**

6010 YUCCA DR.  
FORT PIERCE, FL 34982 US

**New Mailing Address:**

FEI Number: 65-0350863

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

MONESCALCHI, RICHARD J P.A.  
1035 S. STATE RD. 7  
WELLINGTON, FL 33414 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: P ( ) Delete  
Name: EDWARDS, E. ELIZABETH  
Address: 6010 YUCCA DR.  
City-St-Zip: FORT PIERCE, FL 34982 US

Title: VP (X) Delete  
Name: PYNN, LLOYD W  
Address: 18261 BOCA WAY DR.  
City-St-Zip: BOCA RATON, FL 33497 US

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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: E. ELIZABETH EDWARDS

PRES

04/24/2008

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date