

# 2007 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P04000015201

**FILED**  
**Oct 06, 2007**  
**Secretary of State**

**Entity Name:** A POOL'S BEST FRIEND, INC.

**Current Principal Place of Business:**

2678 THIRD AVENUE N.  
CLEARWATER, FL 33759

**New Principal Place of Business:**

**Current Mailing Address:**

2678 THIRD AVENUE N.  
CLEARWATER, FL 33759

**New Mailing Address:**

FEI Number: 20-0063340

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

BUSINESS FILINGS INCORPORATED  
1203 GOVERNORS SQUARE BLVD  
SUITE 101  
TALLAHASSEE, FL 323012960 US

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

GANGELHOFF, BRIAN D  
2678 THIRD AVE N  
CLEARWATER, FL 337591045 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: BRIAN GANGELHOFF

10/06/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: D ( ) Delete  
Name: GANGELHOFF, BRIAN  
Address: 2678 THIRD AVENUE N.  
City-St-Zip: CLEARWATER, FL 33759

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

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: BRIAN GANGELHOFF

D

10/06/2007

Electronic Signature of Signing Officer or Director

Date