| Name and Address of Current Registered Agent: | | | | | |
|--|---|--|-----------------|------------------------|------------|
| | MORRIS, SHAN 9585 CR 13N ST. AUGUSTIN | E W E, FL 32092 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 | : SHANE W. MORRIS | | | 02/10/2015 |
| | | Electronic Signature of Registered Agent | | | Date |
| | Officer/Direc | tor Detail : | | | |
| | Title | PRES | Title | SEC | |
| | Name | MORRIS, SHANE W | Name | MORRIS, SHANE W | |
| | Address | 9585 COUNTY ROAD 13N | Address | 9585 CR 13N | |
| | City-State-Zip: | ST. AUGUSTINE FL 32092 | City-State-Zip: | ST. AUGUSTINE FL 32092 | |
| | Title | TREA | | | |
| | Name | MORRIS, SHANE W | | | |
| | Address | 9585 COUNTY ROAD 13 N | | | |
| | | | | | |

12489-3 SAN JOSE BLVD

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I hereby 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 all other like empowered.

SIGNATURE: SHANE W. MORRIS

City-State-Zip: ST. AUGUSTINE FL 32092

PRESIDENT

02/10/2015

Electronic Signature of Signing Officer/Director Detail

2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# L10738

Entity Name: SUPERIOR DESIGN POOLS & SPAS, INC.

Current Principal Place of Business:

12489-3 SAN JOSE BLVD JACKSONVILLE, FL 32223

Current Mailing Address:

JACKSONVILLE, FL 32223 US

FEI Number: 59-2971105

Certificate of Status Desired: Yes

Feb 10, 2015 **Secretary of State** CC2591041275

FILED

Date