

2016 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# L64858

Entity Name: POOLS PLUS, INC.

Current Principal Place of Business:

4535 DOMESTIC AVE
NAPLES, FL 34104

Current Mailing Address:

4535 DOMESTIC AVE
NAPLES, FL 34104 US

FEI Number: 59-3005402

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

BLACKLIDGE, MICHAEL F
486 LAGOON AVE
NAPLES, FL 34108 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:

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title D
Name BLACKLIDGE, MICHAEL F
Address 486 LAGOON AVE.
City-State-Zip: NAPLES FL 34108

Title O
Name BLACKLIDGE, ELLEN D
Address 486 LAGOON AVE
City-State-Zip: NAPLES FL 34108

Title TREASURER
Name BLACKLIDGE, LISA ELLEN
Address 4535 DOMESTIC AVE
City-State-Zip: NAPLES FL 34104

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: ELLEN BLACKLIDGE

OFFICER

02/11/2016

Electronic Signature of Signing Officer/Director Detail

Date