

**2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P03000124999

**Entity Name:** BURNS POOL SERVICE, INC.

**Current Principal Place of Business:**

382 CALLIOPE STREET  
OCOE, FL 34761

**Current Mailing Address:**

PO BOX 850  
WINDERMERE, FL 34786 US

**FEI Number:** 20-0864760

**Certificate of Status Desired:** No

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

BURNS, JOSEPH  
382 CALLIOPE STREET  
OCOE, FL 34761 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 BURNS, JOSEPH  
Address 382 CALLIOPE STREET  
City-State-Zip: OCOE FL 34761

Title D  
Name BURNS, JENNY  
Address 382 CALLIOPE STREET  
City-State-Zip: OCOE FL 34761

*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:** JOSEPH BURNS

**PRESIDENT**

**04/08/2015**

Electronic Signature of Signing Officer/Director Detail

Date