

**2021 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P04000016180

**Entity Name:** SAPPHIRE POOLS, INC.

**Current Principal Place of Business:**

1740 S.W. BELGRAVE TERRACE  
STUART, FL 34997-7044

**Current Mailing Address:**

1740 S.W. BELGRAVE TERRACE  
STUART, FL 34997-7044

**FEI Number:** 03-0536203

**Certificate of Status Desired:** No

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

BLOT, WILLIAM  
1740 S.W. BELGRAVE TERRACE  
STUART, FL 34997-7044 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 PD  
Name BLOT, WILLIAM  
Address 1740 S.W. BELGRAVE TERRACE  
City-State-Zip: STUART FL 34997-7044

*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:** WILLIAM BLOT

**PRESIDENT**

**02/05/2021**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date