

2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000005117

Entity Name: FLORIDA POOL ENCLOSURES, INC.

Current Principal Place of Business:

922 HICKORY STREET
ALTAMONTE SPRINGS, FL 32701

Current Mailing Address:

P O BOX 521136
LONGWOOD, FL 32752 US

FEI Number: 59-3420005

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

DELAHOZ, MIKE
922 HICKORY STREET
ALTAMONTE SPRINGS, FL 32701 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	ST	Title	P
Name	DELAHOZ, NYDIA	Name	DELAHOZ, MIKE
Address	395 BERNARD STREET	Address	922 HICKORY STREET
City-State-Zip:	LONGWOOD FL 32750	City-State-Zip:	ALTAMONTE SPRINGS FL 32701
Title	VP		
Name	DELAHOZ, MIGUEL		
Address	395 BERNARD STREET		
City-State-Zip:	LONGWOOD FL 32750		

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: MIKE DELAHOZ

PRESIDENT

04/24/2014

Electronic Signature of Signing Officer/Director Detail

Date