

**2013 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P98000028441

**Entity Name:** HANSON'S POOL SERVICE, INC.

**Current Principal Place of Business:**

19239 N. DALE MABRY HWY.  
#411  
LUTZ, FL 33548

**Current Mailing Address:**

19239 N. DALE MABRY HWY.  
#411  
LUTZ, FL 33548 US

**FEI Number: 59-3505916**

**Certificate of Status Desired: No**

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

SKERKOWSKI, BERNARD  
2908 MAGDELENE WOODS DRIVE  
TAMPA, FL 33618 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	Title	D
Name	HANSON, STEVEN F	Name	HANSON, TRACY K
Address	18401 OWL DR.	Address	18401 OWL DR.
City-State-Zip:	LUTZ FL 33548	City-State-Zip:	LUTZ FL 33548

*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: STEVEN HANSON**

**OWNER**

**03/25/2013**

Electronic Signature of Signing Officer/Director Detail

Date