

**2013 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P09000023492

**Entity Name:** CABANA POOLS OF SOUTHWEST FLORIDA, INC.

**Current Principal Place of Business:**

2941 RENNE CT  
FT MYERS , FL 33905

**Current Mailing Address:**

PO BOX 50670  
FT. MYERS, FL 33994 US

**FEI Number: 26-4458114**

**Certificate of Status Desired: No**

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

DERMODY, KEITH P  
2941 RENNE CT  
FT MYERS , FL 33905 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            PRES  
Name            DERMODY, KEITH P  
Address        2941 RENNE CT  
City-State-Zip: FT MYERS FL 33905

*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: KEITH DERMODY**

**PREZ**

**04/13/2013**

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

\_\_\_\_\_  
Date