

2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P10000052942

Entity Name: CABANA BOY POOL CARE, INC.

Current Principal Place of Business:

121 ORMOND DR.
INDIALANTIC, FL 32903

Current Mailing Address:

121 ORMOND DR.
INDIALANTIC, FL 32903 US

FEI Number: 45-5370972

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SULLIVAN, HAYES
121 ORMOND DR.
INDIALANTIC, FL 32903 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 P
Name SULLIVAN, HAYES
Address 121 ORMOND DR.
City-State-Zip: INDIALANTIC FL 32903

Title S
Name SULLIVAN, CARRIE
Address 121 ORMOND DR.
City-State-Zip: INDIALANTIC FL 32903

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: CARRIE SULLIVAN

SECRETARY

04/14/2014

Electronic Signature of Signing Officer/Director Detail

Date