



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS
Office of the Secretary of State
Matthew A. Brown, Secretary of State

Corporations Division
100 North Main Street
Providence, RI 02903-1335
401.222.3040

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2005

Filing Period: January 1 - March 1 • Filing Fee: \$50.00

(FORM MUST BE TYPED OR PRINTED IN BLACK)

1. Corporate ID No. 74903		2. Name of Corporation The Pool Doctor of Rhode Island, Inc.			
3. Street Address Principal Business Office 2200 Nooseneck Hill Rd		City Coventry		State RI	Zip 02816
4. Business Phone No. (401) 392-1300		5. State of Incorporation RHODE ISLAND			6. SIC Code 5884
7. Brief Description of the Character of Business Conducted in Rhode Island SALES, SERVICE, AND INSTALLATION OF POOLS.					
8. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name Ronald Leclerc			Vice President Name Debra Leclerc		
Street Address 221 New London Tpk			Street Address 221 New London Tpk		
City Richmond			City Richmond		
State RI			State RI		
Zip 02898			Zip 02898		
Secretary Name Debra Leclerc			Treasurer Name Debra Leclerc		
Street Address 221 New London Tpk			Street Address 221 New London Tpk		
City Richmond			City Richmond		
State RI			State RI		
Zip 02898			Zip 02898		
9. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
Director Name Ralph Tillson			Director Name Conrad Burns		
Street Address 35 Gentry Circle			Street Address Liaque Ave		
City Exeter			City Coventry		
State RI			State RI		
Zip 02822			Zip 02816		
Director Name			Director Name		
Street Address			Street Address		
City			City		
State			State		
Zip			Zip		
10. SHARES AUTHORIZED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>			11. SHARES ISSUED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>		
AUTHORIZED SHARES			ISSUED SHARES		
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value
100 NO PAR VALUE	Common	None			

This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee



File Date	2/1/05
Check No.	2141
By:	DA
FOR SECRETARY OF STATE USE ONLY	

Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.

Signature of Officer: Ronald E Leclerc Date: 1-28-05
Print or Type Name of Officer: Ronald E Leclerc
Title of Officer: President



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS
Office of the Secretary of State
Matthew A. Brown, Secretary of State

Corporations Division
100 North Main Street
Providence, RI 02903-1335
401.222.3040

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2004

Filing Period: January 1 - March 1 • Filing Fee: \$50.00

(FORM MUST BE TYPED OR PRINTED IN BLACK)

1. Corporate ID No. 74903		2. Name of Corporation The Pool Doctor of Rhode Island, Inc.			
3. Street Address Principal Business Office 2200 Nooseneck Hill Rd		City Coventry	State RI		
4. Business Phone No. (401) 392-1300		5. State of Incorporation RHODE ISLAND	6. SIC Code 5884		
7. Brief Description of the Character of Business Conducted in Rhode Island SALES, SERVICE, AND INSTALLATION OF POOLS.					
8. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name Ronald Leclerc		Vice President Name Debra Tillson - Leclerc			
Street Address 221 New London Tpk		Street Address 221 New London Tpk			
City Richmond	State RI	City Richmond	State RI		
Zip 02898		Zip 02898			
Secretary Name Debra Tillson - Leclerc		Treasurer Name Debra Tillson - Leclerc			
Street Address 221 New London Tpk		Street Address 221 New London Tpk			
City Richmond	State RI	City Richmond	State RI		
Zip 02898		Zip 02898			
9. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
Director Name Ralph Tillson		Director Name Conrad Burns			
Street Address 35 Gentry Circle		Street Address Tiaque Ave			
City Exeter	State RI	City Coventry	State RI		
Zip 02822		Zip 02816			
Director Name		Director Name			
Street Address		Street Address			
City	State	City	State		
Zip		Zip			
10. SHARES AUTHORIZED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>		11. SHARES ISSUED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>			
AUTHORIZED SHARES		ISSUED SHARES			
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value
100 NO PAR VALUE			100	Common	none

This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee



* 7 4 9 0 3 *

File Date 2/20/04
Check No. 153
By: SC

FOR SECRETARY OF STATE USE ONLY

Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.

Ronald E. Leclerc 2-18-04
Signature of Officer Date
Ronald E. Leclerc
Print or Type Name of Officer
President
Title of Officer



STATE OF RHODE ISLAND
AND PROVIDENCE PLANTATIONS
Office of the Secretary of State

Edward S. Inman, III, Secretary of State
Corporations Division
100 North Main Street, Providence, RI 02903-1335
401-222-3040



PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2003

Filing Period: January 1-March 1 • Filing Fee: \$50.00

(FORM MUST BE TYPED OR PRINTED IN BLACK)

1. Corporate ID No.

74903

2. Name of Corporation

The Pool Doctor of Rhode Island, Inc.

3. Street Address Principal Business Office

2200 Nooseneck Hill Rd

City

Coventry

State

RI

Zip

02816

4. Business Phone No.

(401) 392-1300

5. State of Incorporation

RHODE ISLAND

6. SIC Code

5884

7. Brief Description of the Character of Business Conducted in Rhode Island

Swimming Pool, Spa, Retailer & Service Co.

8. NAMES AND ADDRESSES OF THE OFFICERS ("X" BOX FOR ATTACHMENT)

FILL IN SPACES BEFORE USING ATTACHMENTS

President Name

Ronald E. Leclerc

Street Address

221 New London Tpke

Richmond RI

State

Zip

02898

Vice President Name

Debra Leclerc

Street Address

221 New London Tpke

Richmond RI

State

Zip

02898

Secretary Name

Debra Leclerc

Street Address

221 New London Tpke

Richmond RI

State

Zip

02898

Treasurer Name

Debra Leclerc

Street Address

221 New London Tpke

Richmond RI

State

Zip

02898

9. NAMES AND ADDRESSES OF THE DIRECTORS ("X" BOX FOR ATTACHMENT)

FILL IN SPACES BEFORE USING ATTACHMENTS

Director Name

Ralph Tillson

Street Address

35 Gentry Circle

Exeter RI

State

Zip

02822

Director Name

Conrad Burns

Street Address

Tiaque Ave

Coventry RI

State

Zip

02816

Street Address

Street Address

City

State

Zip

City

State

Zip

10. SHARES AUTHORIZED ("X" BOX FOR ATTACHMENT)

AUTHORIZED SHARES

Number of Shares

Class/Series

Par Value

100 NO PAR VALUE

Common None 100

11. SHARES ISSUED ("X" BOX FOR ATTACHMENT)

ISSUED SHARES

Number of Shares

Class/Series

Par Value

0

This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee



* 7 4 9 0 3 *

File Date:

3-31-03

8800

Check No.:

2

By:

FOR SECRETARY OF STATE USE ONLY

Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.

Ronald E. Leclerc 2-12-03

Signature of Officer

Date

Ronald E. Leclerc

Print or Type Name of Officer

President

Title of Officer

5

Form 630 12/02



STATE OF RHODE ISLAND
AND PROVIDENCE PLANTATIONS
Office of the Secretary of State

Edward S. Inman, III, Secretary of State
Corporations Division
100 North Main Street, Providence, RI 02903-1335
401-222-3040



PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2002

Filing Period: January 1-March 1 • Filing Fee: \$50.00

(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No.

74903

2. Name of Corporation

The Pool Doctor of Rhode Island, Inc.

3. Street Address Principal Business Office

2200 Nooseneck Hill Rd
(401) 392-1300
RHODE ISLAND

City

Coventry

State

RI

Zip

02816

4. Business Phone No.

5. State of Incorporation

6. SIC Code

5884

7. Brief Description of the Character of Business Conducted in Rhode Island

pools, spa grills - Service & Sales

8. NAMES AND ADDRESSES OF THE OFFICERS ("X" BOX FOR ATTACHMENT)

FILL IN SPACES BEFORE USING ATTACHMENTS

President Name

Ronald E. Leclerc

Street Address

221 New London Tpk
Richmond RI 02898

City State Zip

Debra Tillson-Leclerc

221 New London Tpk
Richmond RI 02898

City State Zip

9. NAMES AND ADDRESSES OF THE DIRECTORS ("X" BOX FOR ATTACHMENT)

FILL IN SPACES BEFORE USING ATTACHMENTS

Director Name

Ralph R. Tillson

35 Gentry Circle
Exeter RI 02822

City State Zip

Director Name

None

Street Address

City State Zip

Vice President Name

Debra Tillson-Leclerc

221 New London Tpk
Richmond RI 02898

City State Zip

Debra Tillson-Leclerc

221 New London Tpk
Richmond RI 02898

City State Zip

Director Name

Conrad Burns

Triague Ave
Coventry RI 02816

City State Zip

Director Name

None

Street Address

City State Zip

10. SHARES AUTHORIZED ("X" BOX FOR ATTACHMENT)

AUTHORIZED SHARES

Number of Shares

Class/Series

Par Value

100 NO PAR VALUE

Common

None

11. SHARES ISSUED ("X" BOX FOR ATTACHMENT)

ISSUED SHARES

Number of Shares

Class/Series

Par Value

None

0

This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee



* 7 4 9 0 3 *

4-15-02

File Date:

Check No.: 7716

By: [Signature]

FOR SECRETARY OF STATE USE ONLY

Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.

Ronald E. Leclerc 3-1-02
Signature of Officer Date

Ronald E. Leclerc
Print or Type Name of Officer

PRESIDENT
Title of Officer



STATE OF RHODE ISLAND
AND PROVIDENCE PLANTATIONS
Office of the Secretary of State

Corporations Division
100 North Main Street, Providence, RI 02903-1335
401-222-3040



PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2001

Filing Period: January 1-March 1 • Filing Fee: \$50.00

(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No.

74903

2. Name of Corporation

The Pool Doctor of Rhode Island, Inc.

3. Street Address Principal Business Office

8280 Nobseneck Hill Road

City

Coventry

State

RI

Zip

02816

4. Business Phone No.

5. State of Incorporation

RHODE ISLAND

6. SIC Code

5884

7. Brief Description of the Character of Business Conducted in Rhode Island

POOLS & SPAS - Service & Sales

8. NAMES AND ADDRESSES OF THE OFFICERS ("X" BOX FOR ATTACHMENT)

FILL IN SPACES BEFORE USING ATTACHMENTS

President Name

Ronald Leclerc

Street Address

221 New London Tpke

City

State

Zip

Wyoming, RI 02898

Secretary Name

Debra Tillson - Leclerc

Street Address

221 New London Tpke

City

State

Zip

Wyoming, RI 02898

Vice President Name

Debra Tillson - Leclerc

Street Address

221 New London Tpke

City

State

Zip

Wyoming, RI 02898

Treasurer Name

Debra Tillson - Leclerc

Street Address

221 New London Tpke

City

State

Zip

Wyoming, RI 02898

9. NAMES AND ADDRESSES OF THE DIRECTORS ("X" BOX FOR ATTACHMENT)

FILL IN SPACES BEFORE USING ATTACHMENTS

Director Name

Ralph Tillson

Street Address

35 Gentry Circle

City

State

Zip

Exeter, RI 02822

Director Name

None

Street Address

City

State

Zip

Director Name

Conrad Burns

Street Address

Trigue Ave.

City

State

Zip

Coventry, RI 02816

Director Name

None

Street Address

City

State

Zip

10. SHARES AUTHORIZED ("X" BOX FOR ATTACHMENT)

AUTHORIZED SHARES

Number of Shares

Class/Series

Par Value

100 NO PAR VALUE

11. SHARES ISSUED ("X" BOX FOR ATTACHMENT)

ISSUED SHARES

Number of Shares

Class/Series

Par Value

100

Common None

This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee



* 7 4 9 0 3 *

File Date: 3/1

Check No.: 6542

By: 2

FOR SECRETARY OF STATE USE ONLY

Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements and that all statements contained herein are true and correct.

Ronald Leclerc 2-22-01
Signature of Officer Date

RONALD E. LECLERC
Print or Type Name of Officer

PRESIDENT
Title of Officer



STATE OF RHODE ISLAND
AND PROVIDENCE PLANTATIONS
Office of the Secretary of State

James R. Langevin, Secretary of State
Corporations Division
100 North Main Street, Providence, RI 02903-1335
401-222-3040

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2000

Filing Period: January 1-March 1 • Filing Fee: \$50.00

(FORM MUST BE TYPED IN BLACK)



1. Corporate ID No.

74903

2. Name of Corporation

The Pool Doctor of Rhode Island, Inc.

3. Street Address Principal Business Office

2280 Nooseneck Hill Rd

City

Coventry

State

RI

Zip

02816

4. Business Phone No.

(401) 392-1300

5. State of Incorporation

RHODE ISLAND

6. SIC Code

5884

7. Brief Description of the Character of Business Conducted in Rhode Island

pools & spas - service & sales

8. NAMES AND ADDRESSES OF THE OFFICERS ("X" BOX FOR ATTACHMENT)

FILL IN SPACES BEFORE USING ATTACHMENTS

President Name

Ronald Leclerc

Street Address

221 New London Tpk

City

State

Zip

Wyoming RI 02898

Secretary Name

Debra Tillson-Leclerc

Street Address

221 New London Tpk

City

State

Zip

Wyoming RI 02898

Vice President Name

Darrin Cumminskey

Street Address

56 Smith St

City

State

Zip

Warwick RI 02886

Treasurer Name

Debra Tillson-Leclerc

Street Address

221 New London Tpk

City

State

Zip

Wyoming RI 02898

9. NAMES AND ADDRESSES OF THE DIRECTORS ("X" BOX FOR ATTACHMENT)

FILL IN SPACES BEFORE USING ATTACHMENTS

Director Name

Ralph Tillson

Street Address

35 Gentry Circle

City

State

Zip

Exeter RI 02822

Director Name

Conrad Burns

Street Address

110 Que Ave

City

State

Zip

Coventry RI 02814

Street Address

Street Address

City

State

Zip

City

State

Zip

10. SHARES AUTHORIZED ("X" BOX FOR ATTACHMENT)

AUTHORIZED SHARES

Number of Shares

Class/Series

Par Value

100 NO PAR VALUE

11. SHARES ISSUED ("X" BOX FOR ATTACHMENT)

ISSUED SHARES

Number of Shares

Class/Series

Par Value

100

Common None

This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee



* 7 4 9 0 3 *

File Date: 1-13-00

Check No.: 5485

By: AMF

FOR SECRETARY OF STATE USE ONLY

Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.

Ronald E Leclerc 1-7-00
Signature of Officer Date

Ronald E Leclerc
Print or Type Name of Officer

Pres
Title of Officer



STATE OF RHODE ISLAND
AND PROVIDENCE PLANTATIONS
Office of the Secretary of State

James R. Langevin, Secretary of State
Corporations Division
100 North Main Street, Providence, RI 02903-1335
401-222-3040

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 1999

Filing Period: January 1-March 1 • Filing Fee: \$50.00

(FORM MUST BE TYPED IN BLACK)



1. Corporate ID No. 74903		2. Name of Corporation The Pool Doctor, Inc.	
3. Street Address Principal Business Office 2280 Nooseneck Hill Rd Coventry		City RI	Zip 02816
4. Business Phone No. (401) 392-1300		5. State of Incorporation RHODE ISLAND	
6. SIC Code 5884			
7. Brief Description of the Character of Business Conducted in Rhode Island Swimming pools & spas - service & sales			
8. NAMES AND ADDRESSES OF THE OFFICERS ("X" BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS			
President Name Ronald E. Leclerc		Vice President Name Darrin T. Commiskey	
Street Address 221 New London Tpke		Street Address 56 Smith St.	
City Wyoming		City Warwick	
State RI		State RI	
Zip 02898		Zip 02886	
Secretary Name Debra Tillson-Leclerc		Treasurer Name Debra Tillson-Leclerc	
Street Address 221 New London Tpke		Street Address 221 New London Tpke	
City Wyoming		City Wyoming	
State RI		State RI	
Zip 02898		Zip 02898	
9. NAMES AND ADDRESSES OF THE DIRECTORS ("X" BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS			
Director Name Ralph Tillson		Director Name Conrad Burns	
Street Address 35 Gentry		Street Address Tiogogue Ave	
City Exeter		City Coventry	
State RI		State RI	
Zip 02822		Zip 02816	
10. SHARES AUTHORIZED ("X" BOX FOR ATTACHMENT)			
AUTHORIZED SHARES			
Number of Shares	Class/Series	Par Value	
100 SHS NO PAR VALUE			
11. SHARES ISSUED ("X" BOX FOR ATTACHMENT)			
ISSUED SHARES			
Number of Shares	Class/Series	Par Value	
100 Common none			

This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee



* 7 4 9 0 3 *

File Date: June 22, 1999

Check No.: 4981

By: [Signature]

FOR SECRETARY OF STATE USE ONLY

Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.

Ronald E. Leclerc
Signature of Officer Date

Ronald E. Leclerc
Print or Type Name of Officer

President
Title of Officer



STATE OF RHODE ISLAND
AND PROVIDENCE PLANTATIONS
Office of the Secretary of State

James R. Langevin, Secretary of State
Corporations Division
100 North Main Street, Providence, RI 02903-1335
401-277-3040



PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 1998

Filing Period: January 1-March 1 • Filing Fee: \$50.00

(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No. **74903** 2. Name of Corporation **The Pool Doctor, Inc.**
3. Street Address Principal Business Office **2280 Nooseneck Hill Road** City **Coventry** State **RI** Zip **02816**
4. Business Phone No. **(401) 391-1300** 5. State of Incorporation **RHODE ISLAND** 6. SIC Code **5884**
7. Brief Description of the Character of Business Conducted in Rhode Island
Pool & spa sales & service

8. NAMES AND ADDRESSES OF THE OFFICERS ("X" BOX FOR ATTACHMENT)

President Name **Ronald Leclerc** Vice President Name **Darrin Cummiskey**
Street Address **221 New London Turnpike** Street Address
City **Richmond** State **RI** Zip **02819** City **Warwick** State **RI** Zip **02886**
Secretary Name **Deborah Leclerc**
Street Address **221 New London Turnpike**
City **Richmond** State **RI** Zip **02819**

9. NAMES AND ADDRESSES OF THE DIRECTORS ("X" BOX FOR ATTACHMENT)

Director Name **Ronald Leclerc** Director Name **Darrin Cummiskey**
Street Address **221 New London Turnpike** Street Address **56 Smith Street**
City **Richmond** State **RI** Zip **02819** City **Warwick** State **RI** Zip **02886**

10. SHARES AUTHORIZED ("X" BOX FOR ATTACHMENT)

AUTHORIZED SHARES
Number of Shares Class/Series Par Value
100 SHS NO PAR VALUE Common None

11. SHARES ISSUED ("X" BOX FOR ATTACHMENT)

ISSUED SHARES
Number of Shares Class/Series Par Value
1 00 Common None

This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee



* 7 4 9 0 3 *

File Date: **2-17-98**
Check No.: **3802**
By: **ICP**

FOR SECRETARY OF STATE USE ONLY

Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.

Ronald Leclerc 2/4/98
Signature of Officer Date

Ronald Leclerc
Print or Type Name of Officer
President

Title of Officer



STATE OF RHODE ISLAND
AND PROVIDENCE PLANTATIONS
Office of the Secretary of State

James R. Langevin, Secretary of State
Corporations Division
100 North Main Street, Providence, RI 02903-1335
401-277-3040



PROFIT CORPORATION ANNUAL REPORT 1997

Filing Period: January 1-March 1 • Filing Fee: \$50.00

(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No.

74903

2. Name of Corporation

The Pool Doctor, Inc.

3. Street Address Principal Business Office

2280 Noaseneck Hill Rd Coventry

State

RI

Zip

02816

4. Business Phone No.

(401) 392-1308

5. State of Incorporation

RHODE ISLAND

6. SIC Code

5884

7. Brief Description of the Character of Business Conducted in Rhode Island

Swimming pools, spas, service, sales

8. NAMES AND ADDRESSES OF THE OFFICERS ("X" BOX FOR ATTACHMENT)

President Name

Ronald E. Leclerc

Street Address

221 New London Tpk

City

State

Zip

Wyoming RI

02898

Secretary Name

Darrin Commiskey

Street Address

56 Smith St

City

State

Zip

Warwick RI

02886

Vice President Name

Darrin Commiskey

Street Address

56 Smith St

City

State

Zip

Warwick RI

02886

Treasurer Name

Debra Tillson-Leclerc

Street Address

221 New London Tpk

City

State

Zip

Wyoming RI

02898

9. NAMES AND ADDRESSES OF THE DIRECTORS ("X" BOX FOR ATTACHMENT)

Director Name

Ralph Tillson

Street Address

4 Cambio Ct

City

State

Zip

W Greenwich RI

02817

Director Name

Conrad Burns

Street Address

Tieque Ave

City

State

Zip

Coventry RI

02816

Street Address

City

State

Zip

Street Address

City

State

Zip

10. SHARES AUTHORIZED AND ISSUED ("X" BOX FOR ATTACHMENT)

AUTHORIZED SHARES

Number of Shares

Class/Series

Par Value

100 SHS NO PAR VALUE

ISSUED SHARES

Number of Shares

Class/Series

Par Value

100

Common None

This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee



* 7 4 9 0 3 *

File Date: 3-3-97

Check No.: 3109

By: WLP / JCL

FOR SECRETARY OF STATE USE ONLY

Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.

Ronald E. Leclerc 2-13-97
Signature of Officer Date

Ronald E. Leclerc
Print or Type Name of Officer

President
Title of Officer

PROFIT CORPORATION ANNUAL REPORT

1996



State of Rhode Island and Providence Plantations
James R. Langevin, Secretary of State
Corporations Division
100 North Main Street
Providence, Rhode Island 02903-1335 • (401) 277-3040

Filing Period: January 1-March 1
Filing Fee: \$50.00

PLEASE TYPE OR PRINT IN BLACK INK.

1. CORPORATE ID NO. 74903	2. NAME OF CORPORATION The Pool Doctor, Inc.
3. STREET ADDRESS PRINCIPAL BUSINESS OFFICE 2280 Nooseneck Hill Rd	CITY Coventry
4. BUSINESS PHONE NO. (401) 392-1300	STATE RI
5. STATE OF INCORPORATION RHODE ISLAND	ZIP CODE 02816
6. SIC CODE 5884	

7. BRIEF DESCRIPTION OF THE CHARACTER OF BUSINESS CONDUCTED IN RHODE ISLAND
Pool & Spa Service & Sales

8. NAMES AND ADDRESSES OF THE OFFICERS			
PRESIDENT NAME Ronald E. Leclerc	VICE PRESIDENT NAME Darrin Cumiskey		
STREET ADDRESS 221 New London Tpk	STREET ADDRESS 56 Smith Street		
CITY Wyoming	CITY Warwick	STATE RI	STATE RI
ZIP CODE 02898	ZIP CODE 02886		
SECRETARY NAME Darrin Cumiskey	TREASURER NAME Debra Tillson-Leclerc		
STREET ADDRESS 56 Smith St	STREET ADDRESS 221 New London Tpk		
CITY Warwick	CITY Wyoming	STATE RI	STATE RI
ZIP CODE 02886	ZIP CODE 02898		

9. NAMES AND ADDRESSES OF THE DIRECTORS			
DIRECTOR NAME Ralph R. Tillson	DIRECTOR NAME Conrad Burns		
STREET ADDRESS 4 Cambio Ct	STREET ADDRESS Tique Ave		
CITY W. Greenwich	CITY Coventry	STATE RI	STATE RI
ZIP CODE 02817	ZIP CODE 02816		
DIRECTOR NAME	DIRECTOR NAME		
STREET ADDRESS	STREET ADDRESS		
CITY	CITY	STATE	STATE
ZIP CODE	ZIP CODE		

10. SHARES AUTHORIZED AND ISSUED			
AUTHORIZED SHARES		ISSUED SHARES	
NUMBER OF SHARES	CLASS / SERIES	NUMBER OF SHARES	CLASS / SERIES
100 SHS NO PAR VALUE		100	none

This report must be **SIGNED IN INK** by either the
President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee

Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.

File Date: 2/5/96

Check No: 2388

By: cc/lf

For Secretary of State Use Only

Signature of Officer
Ronald E. Leclerc

Print or Type Name of Officer
Ronald E. Leclerc

Title of Officer
President

Date
1-18-96

DETACH BOTTOM BEFORE RETURNING

ALL ENTRIES MUST BE COMPLETED IN FULL OR THE FORM WILL BE RETURNED.

Corporate ID: 05-0475469 74903 Annual Report for the year: 1995

Name of Corporation: THE POOL DOCTOR INC.

Business entity organized under the laws of the State of: RI

For foreign entity, address and telephone number of principal office:

N/A

Phone: ()

Address and telephone of the principal office of business entity in Rhode Island (Provide street address - Not P.O. Box):

2280 NOOSENECK HILL RD
COVENTRY RI 02816

Phone: (401) 392-1300

Business Entity is (check one):

☒ Business Corporation (See RIGL Chapter 7-1.1)

☐ Professional Service Corporation (See RIGL Chapter 7-5.1)

Brief statement of the character of business conducted in Rhode Island:

SALES SERVICE AND INSTALLATION
OF POOLS AND SPA INCLUDING
RELATED ACTIVITIES

THE NAMES OF THE OFFICERS ARE:

PRESIDENT	STREET ADDRESS	CITY/STATE	ZIP CODE
<u>RONALD E. LECLERC</u>	<u>221 NEW LONDON TPK.</u>	<u>RICHMOND RI</u>	<u>02898</u>
VICE PRESIDENT	STREET ADDRESS	CITY/STATE	ZIP CODE
<u>DARRIN CUMMISKEY</u>	<u>56 SMITH ST</u>	<u>WARWICK RI</u>	<u>02886</u>
SECRETARY	STREET ADDRESS	CITY/STATE	ZIP CODE
<u>DARRIN CUMMISKEY</u>	<u>56 SMITH ST</u>	<u>WARWICK RI</u>	<u>02886</u>
TREASURER	STREET ADDRESS	CITY/STATE	ZIP CODE
<u>DEBRA TILLSON - LECLERC</u>	<u>221 NEW LONDON TPK.</u>	<u>RICHMOND RI</u>	<u>02898</u>

THE NAMES OF THE DIRECTORS ARE:

NAME	STREET ADDRESS	CITY/STATE	ZIP CODE
<u>NAME</u>	<u>STREET ADDRESS</u>	<u>CITY/STATE</u>	<u>ZIP CODE</u>
<u>NAME</u>	<u>STREET ADDRESS</u>	<u>CITY/STATE</u>	<u>ZIP CODE</u>

NUMBER OF SHARES AUTHORIZED (Rider may be attached)

Number of Shares	Class / Series
<u>100</u>	<u>COMMON</u>

NUMBER OF SHARES ISSUED AND OUTSTANDING (Rider may be attached)

Number of Shares	Class / Series
<u>100</u>	<u>COMMON</u>

Date MARCH 1ST, 19 95

By: Ronald E. Leclerc

PRINT OR TYPE NAME OF OFFICER SIGNING

TITLE OF OFFICER SIGNING

RONALD E. LECLERC
PRESIDENT

DESIGNATED REGISTERED AGENT FOR SERVICE OF PROCESS:

PLEASE NOTE: If the registered office and/or registered agent indicated below is incorrect, Form 9 must be filed.

FILED

JUN 15 1995

By CM1737

CONRAD R. BURNS

867 TIOGUE AVE.

COVENTRY RI 02816