

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L01000013057

Entity Name: WELLER IMPORTS, LLC

**FILED**  
**Mar 21, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

1821 S ORANGE BLOSSOM TRAIL  
APOPKA, FL 32703

**New Principal Place of Business:**

**Current Mailing Address:**

1821 S ORANGE BLOSSOM TRAIL  
APOPKA, FL 32703

**New Mailing Address:**

FEI Number: 59-3736951

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

VON WELLER, HAROLD J  
1821 S ORANGE BLOSSOM TRAIL  
APOPKA, FL 32703 US

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

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

**MANAGING MEMBERS/MANAGERS:**

Title: MGR  
Name: WELLER POOLS LLC  
Address: 1821 S. ORANGE BLOSSOM TRAIL  
City-St-Zip: APOPKA, FL 32703 US

Title: CHRM  
Name: VON WELLER, H J  
Address: 1821 S. ORANGE BLOSSOM TRAIL  
City-St-Zip: APOPKA, FL 32703

Title: CFO  
Name: PIPKORN, TIMOTHY G  
Address: 1821 S. ORANGE BLOSSOM TR  
City-St-Zip: APOPKA, FL 32703

Title: PRES  
Name: RUDASILL, CHRIS  
Address: 1821 S ORANGE BLOSSOM TRAIL  
City-St-Zip: APOPKA, FL 32703

I hereby certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: TIMOTHY G PIPKORN

CFO

03/21/2011

\_\_\_\_\_  
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date