

2010 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000022301

Entity Name: WELLER POOLS LLC

FILED
Jan 14, 2010
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: 20-1749040

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

VON WELLER III, H. 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: MGRM
Name: WELLER POOLS USA, INC.
Address: 1821 S ORANGE BLOSSOM TRAIL
City-St-Zip: APOPKA, FL 32703

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

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

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

Title: VP
Name: TUHELA, JOHN
Address: 1821 S. ORANGE BLOSSOM TRAIL
City-St-Zip: APOPKA, FL 32703

Title: VP
Name: OREN, JACK D
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

01/14/2010

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