

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000020459

**FILED**  
**Jan 09, 2008**  
**Secretary of State**

**Entity Name:** LIVING WATER POOL SERVICE, LLC

**Current Principal Place of Business:**

5436 SE GRAHAM DR  
STUART, FL 34997 US

**New Principal Place of Business:**

137 BLACK OLIVE CRES  
ROYAL PALM BEACH, FL 33411 US

**Current Mailing Address:**

5436 SE GRAHAM DR  
STUART, FL 34997 US

**New Mailing Address:**

PO BOX 213426  
ROYAL PALM BEACH, FL 33421 US

FEI Number: 65-1296618

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

GUDERYON, MATTHEW A  
5436 SE GRAHAM DR  
STUART, FL 34997 US

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

GUDERYON, MATTHEW A  
137 BLACK OLIVE CRES  
ROYAL PALM BEACH, FL 33411 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: MATTHEW GUDERYON

01/09/2008

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR ( ) Delete  
Name: GUDERYON, MATTHEW A  
Address: 5436 SE GRAHAM DR  
City-St-Zip: STUART, FL 34997 US

Title: MGRM ( ) Delete  
Name: GUDERYON, FAWN G  
Address: 5436 SE GRAHAM DR  
City-St-Zip: STUART, FL 34997 US

**ADDITIONS/CHANGES:**

Title: MGR (X) Change ( ) Addition  
Name: GUDERYON, MATTHEW A  
Address: 137 BLACK OLIVE CRES  
City-St-Zip: ROYAL PALM BEACH, FL 33411 US

Title: MGRM (X) Change ( ) Addition  
Name: GUDERYON, FAWN G  
Address: 137 BLACK OLIVE CRES  
City-St-Zip: ROYAL PALM BEACH, FL 33411 US

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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: MATTHEW GUDERYON

MGR

01/09/2008

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