2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L00000002851

Entity Name: KING NEPTUNE POOL SERVICE, LLC.

Current Principal Place of Business:	**New Principal Place of Business:**
7120 SAINT JOHN'S WAY UNIVERSITY PARK, FL 34201	5814 WHISTLEWOOD CIRCLE SARASOTA, FL 34232 US

Current Mailing Address:	**New Mailing Address:**
7120 SAINT JOHN'S WAY UNIVERSITY PARK, FL 34201	5814 WHISTLEWOOD CIRCLE SARASOTA, FL 34232 US

FEI Number: 65-0991535   FEI Number Applied For ( )   FEI Number Not Applicable ( )   Certificate of Status Desired ( )

Name and Address of Current Registered Agent:	**Name and Address of New Registered Agent:**
JENKINS, ROSE M 1103 FLORIDA AVE., SUITE 4 PALM HARBOR, FL 34683 US	STOREY, CRAIG 5814 WHISTLEWOOD CIRCLE SARASOTA, FL 34232 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: CRAIG STOREY   04/29/2005

Electronic Signature of Registered Agent   Date

MANAGING MEMBERS/MEMBERS: **ADDITIONS/CHANGES:**

Title:	MGR	( ) Delete	Title:	MGRM	(X) Change ( ) Addition
Name:	LESUR, PATRICK		Name:	STOREY, CRAIG	
Address:	7120 SAINT JOHN'S WAY		Address:	5814 WHISTLEWOOD CIRCLE	
City-St-Zip:	UNIVERSITY PARK, FL 34201		City-St-Zip:	SARASOTA, FL 34232 US	

Title:	MGR	(X) Delete	Title:		( ) Change ( ) Addition
Name:	CHANDELLIER, DIDIER		Name:		
Address:	7120 SAINT JOHN'S WAY		Address:		
City-St-Zip:	UNIVERSITY PARK, FL 34201		City-St-Zip:		

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: CRAIG STOREY   MGMR   04/29/2005

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