

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

ATTACHMENT FILED

05 MAR 11 PM 3:46

 SECRETARY OF STATE
TALLAHASSEE, FLORIDA
20050222

DOCUMENT # L02000032497			
1. Entity Name ASTRAL POOL JACKSONVILLE LLC			
Principal Place of Business 3811 UNIVERSITY BLVD. WEST UNITS 25 AND 27 JACKSONVILLE, FL 32217		Mailing Address PO BOX 61110 JACKSONVILLE, FL 32236	
2. Principal Place of Business		3. Mailing Address 8003 Westside Industrial Dr.	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State Jacksonville FL	
Zip		Zip 32219	
Country		Country USA	
4. FEI Number 56-2305454		Applied For Not Applicable	
5. Certificate of Status Desired ☒ \$5.00 Additional Fee Required		6. Name and Address of Current Registered Agent MOTOLAW, INC. 50 NORTH LAURA ST., STE. 2500 JACKSONVILLE, FL 32202	
7. Name and Address of New Registered Agent Name Fowler White Boggs Fierman Street Address (P.O. Box Number is Not Acceptable) 50 North Laura Street Suite 2200 City Jacksonville FL Zip Code 32202		8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE <u>[Signature]</u> , its Authorized Agent NOTE: Registered Agent signature required when resigning. DATE Feb. 17, 2005	
Filing Fee is \$50.00 Due by May 1, 2005		Make check payable to Florida Department of State	
9. MANAGING MEMBERS/MANAGERS		10. ADDITIONS/CHANGES	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR HOLMES, TIM 2825 SYLVAN LANE JACKSONVILLE, FL 32257 ☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR PILAR VERGES 8003 Westside Industrial Dr. Jacksonville FL 32219 ☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR CABRE HERNANDEZ, ENRIQUE 8003 WESTSIDE INDUSTRIAL DR. JACKSONVILLE, FL 32210 ☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR Pedro BALLART 8003 Westside Industrial Dr. Jacksonville FL 32219 ☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR ELOI-PLANES 8003 Westside Industrial Dr. Jacksonville FL 32219 ☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	2-24-2005 90106 029 50.00 ☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
11. I hereby certify that the information supplied with this filing does not qualify 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 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: <u>[Signature]</u> PILAR VERGES		2/17/05 904-379-0999	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE		Date Daytime Phone #	