

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000045239

FILED
Apr 14, 2009
Secretary of State

Entity Name: SPARKLING BLUE POOL SERVICE & SUPPLY, L.L.C.

Current Principal Place of Business:

2605 SW 15TH AVENUE
CAPE CORAL, FL 33914

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 152328
CAPE CORAL, FL 33915

New Mailing Address:

FEI Number: 20-0002926

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BROTHERIDGE, PAMELA A
2605 SW 15TH AVENUE
CAPE CORAL, FL 33914 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 () Delete
Name: BROTHERIDGE, PAMELA A
Address: 2605 SW 15TH AVENUE
City-St-Zip: CAPE CORAL, FL 33914

Title: MGR () Delete
Name: CALDWELL, BRIAN D
Address: 3857 OLD FORGE RD.
City-St-Zip: VIRGINIA BEACH, VA 23452

Title: MGR () Delete
Name: OSTEEN, JOEY D
Address: 2605 SW 15TH AVE.
City-St-Zip: CAPE CORAL, FL 33914

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: PAMELA A BROTHERIDGE

MGRM

04/14/2009

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