2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000046300

Entity Name: C & C POOL SERVICE, LLC

Current Principal Place of Business:	**New Principal Place of Business:**
137 S. ROMA WAY KISSIMMEE, FL 34746 US	4499 W. IRLO BRONSON HWY KISSIMMEE, FL 34746 US

Current Mailing Address:	**New Mailing Address:**
137 S. ROMA WAY KISSIMMEE, FL 34746 US	PO BOX 470762 CELEBRATION, FL 34747 US

FEI Number: 20-0416237   FEI Number Applied For ( )   FEI Number Not Applicable ( )   Certificate of Status Desired ( )
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:	**Name and Address of New Registered Agent:**
CLARK, JOSEPH C 137 S. ROMA WAY KISSIMMEE, FL 34746 US	CLARK, JOSEPH C 1235 ROYCROFT AVENUE KISSIMMEE, FL 34747 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: J CLEMENT CARK   07/17/2005
_____
                 Electronic Signature of Registered Agent   Date

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

Title:	MGRM ( ) Delete	Title:	( ) Change ( ) Addition
Name:	CLARK, JOSEPH C	Name:	
Address:	137 S. ROMA WAY	Address:	
City-St-Zip:	KISSIMMEE, FL 34746 US	City-St-Zip:	
Title:	MGRM ( ) Delete	Title:	( ) Change ( ) Addition
Name:	CLARK, CAROLINE L	Name:	
Address:	137 S. ROMA WAY	Address:	
City-St-Zip:	KISSIMMEE, FL 34746 US	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: J CLEMENT CLARK   MR   07/17/2005
_____
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date