


2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 23, 2008 08:00 AM
Secretary of State

DOCUMENT # L04000012756	
1. Entity Name ABOUT SAFETY POOLSITTER SAFETY FENCE EDDIE BENTLEY LLC	

Principal Place of Business 159 DAISY STREET HOMOSASSA, FL 34446	Mailing Address 159 DAISY STREET HOMOSASSA, FL 34446
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DO NOT WRITE IN THIS SPACE

04212008No Chg-LLC CR2E083 (12/07)

4. FEI Number 43-2040040	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$5.00 Additional Fee Required	

6. Name and Address of Current Registered Agent BENTLEY, EDDIE 159 DAISY STREET HOMOSASSA, FL 34446
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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 Eddie Bentley Eddie Bentley 4/21/08
Signature, typed or printed name of registered agent, and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS \$138.75
After May 1, 2008 Fee will be \$538.75

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR BENTLEY, EDDIE 159 DAISY STREET HOMOSASSA, FL 34446
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR BENTLEY, VIRGINIA 159 DAISY STREET HOMOSASSA, FL 34446
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05/13/08-80040-023-138.75

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11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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: Eddie Bentley 4/21/08 352-382-5181
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #