

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L04000048914

**FILED**  
**Apr 17, 2012**  
**Secretary of State**

**Entity Name:** POOL GUY POOL SERVICE LLC

**Current Principal Place of Business:**

1093 A1A APT 556  
ST. AUGUSTINE, FL 32080 US

**New Principal Place of Business:**

1093 A1A BEACH BLVD  
APT 556  
ST. AUGUSTINE, FL 32080 US

**Current Mailing Address:**

1093 A1A APT 556  
ST. AUGUSTINE, FL 32080 US

**New Mailing Address:**

1093 A1A BEACH BLVD., PMB 556  
ST. AUGUSTINE, FL 32080 US

**FEI Number:** 16-0763167

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

LYDEN, WILLIAM F III  
1093 A1A APT 556  
ST. AUGUSTINE, FL 32080 US

**Name and Address of New Registered Agent:**

LYDEN, WILLIAM F III  
1093 A1A BEACH BLVD  
APT 556  
ST. AUGUSTINE, FL 32080 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:

04/17/2012

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: LYDEN, WILLIAM F III  
Address: 1093 A1A BEACH BLVD., APT 556  
City-St-Zip: ST. AUGUSTINE, FL 32080

I hereby 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: WILLIAM F LYDEN III

MGRM

04/17/2012

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