

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000079735

FILED
Apr 30, 2007
Secretary of State

Entity Name: ACME POOL SERVICES & SUPPLY, LLC

Current Principal Place of Business:

1731 LAKEWOOD RANCH BLVD. NORTH
BRADENTON, FL 34211

New Principal Place of Business:

6969 S. TAMIAMI TRAIL
SARASOTA, FL 34231

Current Mailing Address:

1731 LAKEWOOD RANCH BLVD. NORTH
BRADENTON, FL 34211

New Mailing Address:

6969 S. TAMIAMI TRAIL
SARASOTA, FL 34231

FEI Number: 20-4349304

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BELL, MARGARET J
1888 MORRIS STREET
SARASOTA, FL 34239 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: MGR () Delete
Name: BELL, MARGARET J
Address: 1731 LAKEWOOD RANCH BLVD. NORTH
City-St-Zip: BRADENTON, FL 34211

Title: MGR () Delete
Name: BELL, EDWARD F
Address: 1731 LAKEWOOD RANCH BLVD. NORTH
City-St-Zip: BRADENTON, FL 34211

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: BELL, MARGARET J
Address: 6969 S. TAMIAMI TRAIL
City-St-Zip: SARASOTA, FL 34231

Title: MGR (X) Change () Addition
Name: BELL, EDWARD F
Address: 6969 S. TAMIAMI TRAIL
City-St-Zip: SARASOTA, FL 34231

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: MARGARET BELL

MGR

04/30/2007

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