

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000092781

FILED
Apr 24, 2008
Secretary of State

Entity Name: POOL CARE, LLC

Current Principal Place of Business:

129 GRACE BLVD
ALTAMONTE SPRINGS, FL 32714

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 520791
LONGWOOD, FL 32752

New Mailing Address:

FEI Number: 20-2102332

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BENKIRAN & MALARET, P.A.
1999 WEST COLONIAL DRIVE
SUITE 204
ORLANDO, FL 32804 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: ADRIAN, LYON
Address: P.O. BOX 520791
City-St-Zip: LONGWOOD, FL 32752

ADDITIONS/CHANGES:

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: ADRIAN LYON

MGRM

04/24/2008

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