

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000027278

FILED
Jan 23, 2009
Secretary of State

Entity Name: MIGLINO BROTHERS POOL SERVICE AND REPAIRS LLC

Current Principal Place of Business:

2412 S.E. CALIGULA AVENUE
PORT ST. LUCIE, FL 34952

New Principal Place of Business:

Current Mailing Address:

PO BOX 7339
PORT ST. LUCIE, FL 349857339

New Mailing Address:

FEI Number: 02-0742277

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MIGLINO, BRANDON J
2412 S.E. CALIGULA AVENUE
PORT ST. LUCIE, FL 34952 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: MIGLINO, BRANDON J
Address: 2412 SOUTHEAST CALIGALA AVENUE
City-St-Zip: PORT SAINT LUCIE, FL 34952

Title: MGRM () Delete
Name: MIGLINO, JUSTIN
Address: 351 SOUTHWEST DWIGHT AVENUE
City-St-Zip: PORT SAINT LUCIE, FL 34983

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: JUSTIN MIGLINO

P

01/23/2009

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