


**2008 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Apr 02, 2008 08:00 AM
Secretary of State

DOCUMENT # L05000030841 1. Entity Name POOLS BY KEITH, LLC	
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Principal Place of Business 11044 MARTIN DRIVE LEESBURG, FL 34788	Mailing Address 11044 MARTIN DRIVE LEESBURG, FL 34788
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DO NOT WRITE IN THIS SPACE



03042008 No Chg-LLC

CR2E083 (12/07)

4. FEI Number 20-2578083	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 HULTZCLAR, RACHEL CPA 66 WEST SEMINOLE AVE EUSTIS, FL 32726	DO NOT WRITE IN THIS SPACE
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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 _____ (NOTE: Registered Agent signature required when reconstituting) 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 WALKER, KEITH 410 WEST SEMINOLE EUSTIS, FL 32726
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04/14/08-80033-014 138.75

**DO NOT WRITE
IN THIS SPACE**

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: Joseph K Walker april 1-08 (352) 516-6959
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #