

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000011114

FILED  
May 02, 2009  
Secretary of State

Entity Name: SOMMERS POOL SERVICE, LLC

**Current Principal Place of Business:**

5617 SAWGRASS ROAD  
SARASOTA, FL 34232 US

**New Principal Place of Business:**

**Current Mailing Address:**

5617 SAWGRASS ROAD  
SARASOTA, FL 34232 US

**New Mailing Address:**

FEI Number: FEI Number Applied For ( ) FEI Number Not Applicable (X) Certificate of Status Desired ( )  
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

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

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

SOMMERS, E. LAMAR  
5617 SAWGRASS ROAD  
SARASOTA, FL 34232 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:

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR ( ) Delete  
Name: SOMMERS, E. LAMAR  
Address: 5617 SAWGRASS ROAD  
City-St-Zip: SARASOTA, FL 34232 US

Title: MGRM ( ) Delete  
Name: SOMMERS, CHERYL  
Address: 5617 SAWGRASS ROAD  
City-St-Zip: SARASOTA, FL 34232 US

**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: E LAMAR SOMMERS

MGR

05/02/2009

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