2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Mar 15, 2007
Secretary of State

DOCUMENT# L06000045053

Entity Name: ORANGE COUNTY POOLS, LLC

Current Principal Place of Business:

3623 DAGON STREET
ORLANDO, FL 32806

New Principal Place of Business:

Current Mailing Address:

3623 DAGON STREET
ORLANDO, FL 32806

New Mailing Address:

FEI Number: 20-4843506 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

FOUST, KATHLEEN M
17 S. ORLANDO AVENUE
KISSIMMEE, FL 34741 US

Name and Address of New Registered Agent:

KWATERSKI, JARED L
3623 DAGON STREET
ORLANDO, FL 32806 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: JARED KWATERSKI 03/15/2007
Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

Title:	MGRM	( ) Delete
Name:	KWATERSKI, JARED	
Address:	3623 DAGON STREET	
City-St-Zip:	ORLANDO, FL 32806	
Title:	MGRM	( ) Delete
Name:	KWATERSKI, KATHERINE	
Address:	3623 DAGON STREET	
City-St-Zip:	ORLANDO, FL 32806	
Title:	MGRM	(X) Delete
Name:	ECKENROD, JASON	
Address:	5465 LAKE MARGARET DRIVE, UNIT E	
City-St-Zip:	ORLANDO, FL 32812	

ADDITIONS/CHANGES:

Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
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 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: JARED KWATERSKI MGRM 03/15/2007
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date