2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 03, 2007
Secretary of State

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Entity Name: BRIXNER POOLS MANAGEMENT, LLC

Current Principal Place of Business:

4849 CYPRESS WOODS DR.
1210
ORLANDO, FL 32811 US

New Principal Place of Business:

12716 WINFIELD SCOTT BLVD
ORLANDO, FL 32837 US

Current Mailing Address:

4849 CYPRESS WOODS DR.
1210
ORLANDO, FL 32811 US

New Mailing Address:

12716 WINFIELD SCOTT BLVD
ORLANDO, FL 32837 US

FEI Number: 20-4861723 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

LARSON, CAROLINE
8818 COMMODITY CIRCLE
40
ORLANDO, FL 32819 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: BRIXNER, WILIIAM
Address: 4849 CYPRESS WOODS DR.
City-St-Zip: ORLANDO, FL 32811 US

Title: MGRM ( ) Delete
Name: MIERES FILHO, MARCO
Address: 4849 CYPRESS WOODS DR.
City-St-Zip: ORLANDO, FL 32819 US

ADDITIONS/CHANGES:

Title: MGRM (X) Change ( ) Addition
Name: BRIXNER, WILLIAM
Address: 12716 WINFIELD SCOTT BLVD
City-St-Zip: ORLANDO, FL 32837 US

Title: MGRM (X) Change ( ) Addition
Name: MIERES FILHO, MARCO
Address: 12716 WINFIELD SCOTT BLVD
City-St-Zip: ORLANDO, FL 32837 US

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: WILLIAM BRIXNER MGRM 04/03/2007

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