

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000064862

FILED  
Jul 09, 2007  
Secretary of State

Entity Name: SAFE SWIM POOL SERVICES LLC

**Current Principal Place of Business:**

1807 SABAL PALM DR  
EDGEWATER, FL 321323230

**New Principal Place of Business:**

**Current Mailing Address:**

1807 SABAL PALM DR  
EDGEWATER, FL 321323230

**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:**

CARR, DAVID T  
1807 SABAL PALM DRIVE  
EDGEWATER, FL 321323230 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: CARR, DAVID T  
Address: 1807 SABAL PALM DR  
City-St-Zip: EDGEWATER, FL 321323230

Title: MGRM ( ) Delete  
Name: CARR, MARY ELIZABETH  
Address: 1807 SABAL PALM DRIVE  
City-St-Zip: EDGEWATER, FL 321323230

**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: DAVID CARR

MGR

07/09/2007

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