2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 30, 2007
Secretary of State

DOCUMENT# L06000101466

Entity Name: POOL-A-CHECK POOLS, LLC

Current Principal Place of Business:

1502 S. HIAWASSE RD
APT. 91
ORLANDO, FL 32835

New Principal Place of Business:

3210 DOWNS COVE RD
WINDERMERE, FL 34786

Current Mailing Address:

1502 S. HIAWASSE RD
APT. 91
ORLANDO, FL 32835

New Mailing Address:

3210 DOWNS COVE RD
WINDERMERE, FL 34786

FEI Number: 20-8067425 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

POLACHECK, CHRISTOPHER L
1502 S. HIAWASSE RD
APT. 91
ORLANDO, FL 32835 US

Name and Address of New Registered Agent:

POLACHECK, CHRISTOPHER L
3210 DOWNS COVE RD
WINDERMERE, FL 34786 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: CHRISTOPHER L POLACHECK 04/30/2007
Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

Title: MGR ( ) Delete
Name: POLACHECK, CHRISTOPHER L
Address: 1502 S. HIAWASSE RD
City-St-Zip: ORLANDO, FL 32835

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: MGR (X) Change ( ) Addition
Name: POLACHECK, CHRISTOPHER L
Address: 3210 DOWNS COVE RD
City-St-Zip: WINDERMERE, FL 34786

Title: MGR ( ) Change (X) Addition
Name: MANLEY, CHARLOTTE A
Address: 3210 DOWNS COVE RD
City-St-Zip: WINDERMERE, FL 34786

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: CHARLOTTE A MANLEY MGR 04/30/2007
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date