

# 2010 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000106718

FILED  
Mar 05, 2010  
Secretary of State

**Entity Name:** DREAMSCAPES POOLS AND SPAS, LLC

**Current Principal Place of Business:**

344 HANNAH LANE  
LAKE MARY, FL 32746 US

**New Principal Place of Business:**

**Current Mailing Address:**

4044 WEST LAKE MARY BLVD.  
SUITE 104327  
LAKE MARY, FL 32746 US

**New Mailing Address:**

**FEI Number:** 71-1015069      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

SHAUGHNESSY, MARK B  
344 HANNAH LANE  
LAKE MARY, FL 32746 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  
**Name:** SHAUGHNESSY, MARK B  
**Address:** 344 HANNAH LANE  
**City-St-Zip:** LAKE MARY, FL 32746 US

**Title:** MGRM  
**Name:** SHAUGHNESSY, MICHAEL A  
**Address:** 344 HANNAH LANE  
**City-St-Zip:** LAKE MARY, FL 32746 US

I hereby 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: MARK SHAUGHNESSY      MGRM      03/05/2010

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