

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000116566

Entity Name: SOUTHERN POOLS, LLC

FILED
May 01, 2009
Secretary of State

Current Principal Place of Business:

5491 HWY 77
CHIPLEY, FL 32428

New Principal Place of Business:

Current Mailing Address:

5491 HWY 77
CHIPLEY, FL 32428

New Mailing Address:

FEI Number: 20-8163907 FEI Number Applied For () FEI Number Not Applicable () 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:

SAPP, KYLE J
5491 HWY 77
CHIPLEY, FL 32428 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: SAPP, KYLE J
Address: 5491 HWY 77
City-St-Zip: CHIPLEY, FL 32428

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

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: SAPP, KYLE J
Address: 5491 HWY 77
City-St-Zip: CHIPLEY, FL 32428

Title: MGR () Change (X) Addition
Name: WILLIAMS, ORAN
Address: 11734 SEASHORE LN
City-St-Zip: PANAMA CITY BEACH, FL 32407

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: KYLE J. SAPP

MGR

05/01/2009

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