2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000009738

Entity Name: PERFECT POOL SERVICE LLC

FILED May 08, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

2975 DOCTORS LAKE DRIVE 3151 ENDEAVOR CT ORANGE PARK, FL 32073 ORANGE PARK, FL 32073

Current Mailing Address: New Mailing Address:

2975 DOCTORS LAKE DRIVE P. O. BOX 440265 ORANGE PARK, FL 32073 P. O. BOX 440265 JACKSONVILLE, FL 32222

FEI Number: 71-1021431 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: Name and Address of New Registered Agent:

FITIZGERALD, STEVEN J
2975 DOCTORS LAKE DRIVE
ORANGE PARK, FL 32073 US
FITIZGERALD, STEVEN J
3151 ENDEAVOR CT
ORANGE PARK, FL 32073 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: 05/08/2009

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

Title: OWNE () Delete Title: MGMR (X) Change () Addition

Name:FITZGERALD, STEVEN JName:FITZGERALD, STEVEN JAddress:2975 DOCTORS LAKE DRAddress:3151 ENDEAVOR CTCity-St-Zip:ORANGE PARK, FL 32073 USCity-St-Zip:ORANGE PARK, FL 32073 US

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: STEVEN J FITZGERALD MGMR 05/08/2009