

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000048051

FILED  
May 15, 2009  
Secretary of State

**Entity Name:** GULF COAST POOL SERVICES, LLC

**Current Principal Place of Business:**

224 7TH STREET  
PORT ST. JOE, FL 32456

**New Principal Place of Business:**

209 7TH STREET  
PORT ST. JOE, FL 32456

**Current Mailing Address:**

224 7TH STREET  
PORT ST. JOE, FL 32456

**New Mailing Address:**

209 7TH STREET  
PORT ST. JOE, FL 32456

**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:**

NOVAK, JEREMY  
224 7TH STREET  
PORT ST. JOE, FL 32456 US

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

NOVAK, JEREMY  
209 7TH STREET  
PORT ST. JOE, FL 32456 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:

05/15/2009

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: FARRELL, J. PATRICK JR.  
Address: 236 BALBOA STREET  
City-St-Zip: PORT ST. JOE, FL 32456

Title: MGRM ( ) Delete  
Name: NOVAK, JEREMY  
Address: 523 7TH STREET  
City-St-Zip: PORT ST. JOE, FL 32456

**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: S. NOVAK

CAM

05/15/2009

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