

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L07000103903

**FILED**  
**Apr 23, 2011**  
**Secretary of State**

**Entity Name:** SWIMMING POOL CONTRACTORS LLC

**Current Principal Place of Business:**

4747 NOB HILL ROAD  
SUITE 13  
SUNRISE, FL 33351

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 450609  
SUNRISE, FL 33345

**New Mailing Address:**

**FEI Number:** 35-2315249

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

SCHROEDER, EDWARD T  
4747 NOB HILL ROAD  
SUITE 13  
SUNRISE, FL 33351 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: MGR  
Name: SCHROEDER, EDWARD T  
Address: 4747 NOB HILL ROAD, SUITE 13  
City-St-Zip: SUNRISE, FL 33351

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: EDWARD T SCHROEDER

MGR

04/23/2011

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