

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L08000029759

**FILED**  
**Apr 29, 2011**  
**Secretary of State**

**Entity Name:** PHILLIP'S POOL SERVICE OF NW FL, LLC

**Current Principal Place of Business:**

1928 KINGSLEE DRIVE  
SOUTHPORT, FL 32409 US

**New Principal Place of Business:**

13934 BLUE SPRINGS RD  
YOUNGSTOWN, FL 32466 US

**Current Mailing Address:**

PO BOX 365  
LYNN HAVEN, FL 32444 US

**New Mailing Address:**

**FEI Number:** 26-2248412      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

HICKS, PHILLIP M  
1928 KINGSLEE DRIVE  
SOUTHPORT, FL 32409 US

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

HICKS, PHILLIP M  
13934 BLUE SPRINGS RD  
YOUNGSTOWN, FL 32466 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: \_\_\_\_\_

Electronic Signature of Registered Agent

04/29/2011

\_\_\_\_\_  
Date

**MANAGING MEMBERS/MANAGERS:**

**Title:** MGRM  
**Name:** HICKS, PHILLIP M  
**Address:** PO BOX 365  
**City-St-Zip:** LYNN HAVEN, FL 32444 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: PHILLIP HICKS

MGR

04/29/2011

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