

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L08000031939

**FILED**  
**Apr 27, 2011**  
**Secretary of State**

**Entity Name:** LABAR POOL SERVICES, LLC

**Current Principal Place of Business:**

10153 ST PAUL DRIVE  
PORT CHARLOTTE, FL 33981

**New Principal Place of Business:**

**Current Mailing Address:**

2828 S. MCCALL ROAD-32  
PMB 25  
ENGLEWOOD, FL 34224

**New Mailing Address:**

**FEI Number:**                      **FEI Number Applied For ( )**                      **FEI Number Not Applicable (X)**                      **Certificate of Status Desired ( )**

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

ANDERS, JOANNE  
10153 ST PAUL DRIVE  
PORT CHARLOTTE, FL 33981      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: ANDERS, JOANNE  
Address: 10153 ST PAUL DRIVE  
City-St-Zip: PORT CHARLOTTE, FL 33981

Title: MGRM  
Name: LABAR, MICHAEL  
Address: 70 MARINER LANE  
City-St-Zip: ROTONDA WEST, FL 33947

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: JOANNE ANDERS

MGR

04/27/2011

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