

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L10000080087

**FILED**  
**Jan 21, 2012**  
**Secretary of State**

**Entity Name:** SEA BREEZE POOL SERVICES LLC

**Current Principal Place of Business:**

2235 WINDSOR CREST LOOP  
APOPKA, FL 32712

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 545  
APOPKA, FL 32704

**New Mailing Address:**

PO BOX 545  
APOPKA, FL 32704 05

**FEI Number:** 27-3215062

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

FLANAGAN, SEAN E  
2235 WINDSOR CREST LOOP  
APOPKA, FL 32712 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:** FLANAGAN, SEAN E  
**Address:** 2235 WINDSOR CREST LOOP  
**City-St-Zip:** APOPKA, FL 32712

**Title:** MGR  
**Name:** FLANAGAN, YVONNE R  
**Address:** 2235 WINDSOR CREST LOOP  
**City-St-Zip:** APOPKA, FL 32712

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:** SEAN E FLANAGAN

MGR

01/21/2012

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