

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L10000111089

**FILED**  
**Mar 19, 2012**  
**Secretary of State**

**Entity Name:** DRAGON OF THE SUN COMMERCIAL POOL AND SPA LLC

**Current Principal Place of Business:**

19506 SABAL STREET  
ORLANDO, FL 32833

**New Principal Place of Business:**

6421 MILNER BLVD. SUITE 2  
ORLANDO, FL 32809

**Current Mailing Address:**

16877 E. COLONIAL DRIVE  
#353  
ORLANDO, FL 32820

**New Mailing Address:**

6421 MILNER BLVD. SUITE 2  
ORLANDO, FL 32809

**FEI Number:** 27-3752479

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

GIST, DAVID S  
19506 SABAL STREET  
ORLANDO, FL 32833 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: GIST, DAVID S  
Address: 6421 MILNER BLVD. SUITE 2  
City-St-Zip: ORLANDO, FL 32809

Title: MGRM  
Name: GIST, SALLY K  
Address: 6421 MILNER BLVD. SUITE 2  
City-St-Zip: ORLANDO, FL 32809

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: SALLY K GIST

MGRM

03/19/2012

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