

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L11000057008

**FILED**  
**Sep 25, 2012**  
**Secretary of State**

**Entity Name:** TROPICAL POOLS OF THE LOWER KEYS LLC

**Current Principal Place of Business:**

24580 OVERSEAS HIGHWAY  
SUMMERLAND KEY, FL 33042

**New Principal Place of Business:**

**Current Mailing Address:**

24580 OVERSEAS HIGHWAY  
SUMMERLAND KEY, FL 33042

**New Mailing Address:**

24643 PARK DR  
SUMMERLAND KEY, FL 33042

**FEI Number:** 45-4149166

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

JACHELSKI, MARK  
24643 PARK DRIVE  
SUMMERLAND KEY, FL 33042 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:** JACHELSKI, MARK  
**Address:** 24643 PARK DRIVE  
**City-St-Zip:** SUMMERLAND KEY, FL 33042

**Title:** MGR  
**Name:** JACHELSKI, DANA  
**Address:** 24643 PARK DRIVE  
**City-St-Zip:** SUMMERLAND KEY, FL 33042

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:** MARK JACHELSKI

MGR

09/25/2012

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