2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M02000000133

Entity Name: SUPERIOR POOL PRODUCTS LLC

FILED Apr 24, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 109 NORTHPARK BLVD., 4TH FL. COVINGTON, LA 70433 **Current Mailing Address: New Mailing Address:** 109 NORTHPARK BLVD., 4TH FL. COVINGTON, LA 70433 FEI Number: 33-0913896 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 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: ADDITIONS/CHANGES: MGRM Title: () Delete (X) Change () Addition MANUEL, MESA P Name: DE LA MESA, MANUEL P Name: 109 NORTHPARK BLVD., STE 400 Address: 109 NORTHPARK BLVD., STE 400 Address: City-St-Zip: COVINGTON, LA 70433 City-St-Zip: COVINGTON, LA 70433 Title: MGRM () Delete Title: () Change () Addition JOSLIN, MARK W Name: Name: Address: 109 NORTHPARK BLVD., STE 400 Address: City-St-Zip: COVINGTON, LA 70433 City-St-Zip: Title: MGRM () Delete Title: MGRM (X) Change () Addition COOK, DAVID A COOK, A. DAVID Name: Name: 109 NORTHPARK BLVD., STE 400 109 NORTHPARK BLVD., STE 400 Address: Address: City-St-Zip: COVINGTON, LA 70433 City-St-Zip: COVINGTON, LA 70433 Title: MGRM () Delete Title: () Change () Addition Name: MURPHY, JOHN M Name: Address: 109 NORTHPARK BLVD., STE 400 Address: City-St-Zip: COVINGTON, LA 70433 City-St-Zip: Title: MGRM () Delete Title: () Change () Addition NELSON, STEPHEN C Name: Name: 109 NORTHPARK BLVD., STE 400 Address: Address: City-St-Zip: COVINGTON, LA 70433 City-St-Zip: Title: () Delete Title: () Change (X) Addition NEIL JENNIEER M. Name: Name: Address: Address: 109 NORTHPARK BLVD., STE. 125 COVINGTON, LA 70433 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further 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: JENNIFER M. NEIL MGR 04/24/2007