2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jan 19, 2009
Secretary of State

DOCUMENT# M02000000133

Entity Name: SUPERIOR POOL PRODUCTS LLC

Current Principal Place of Business:

109 NORTHPARK BLVD., 4TH FL.
COVINGTON, LA 70433

New Principal Place of Business:

Current Mailing Address:

109 NORTHPARK BLVD., SUITE 125
COVINGTON, LA 70433

New Mailing Address:

FEI Number: 33-0913896 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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	( ) Delete
Name:	DE LA MESA, MANUEL P	
Address:	109 NORTHPARK BLVD., STE 125	
City-St-Zip:	COVINGTON, LA 70433	
Title:	MGR	( ) Delete
Name:	JOSLIN, MARK W	
Address:	109 NORTHPARK BLVD., STE 125	
City-St-Zip:	COVINGTON, LA 70433	
Title:	MGR	( ) Delete
Name:	COOK, A. DAVID	
Address:	109 NORTHPARK BLVD., STE 125	
City-St-Zip:	COVINGTON, LA 70433	
Title:	MGR	( ) Delete
Name:	ST. ROMAIN, KENNETH G	
Address:	109 NORTHPARK BLVD., STE 400	
City-St-Zip:	COVINGTON, LA 70433	
Title:	MGR	( ) Delete
Name:	NELSON, STEPHEN C	
Address:	109 NORTHPARK BLVD., STE 125	
City-St-Zip:	COVINGTON, LA 70433	
Title:	MGR	( ) Delete
Name:	NEIL, JENNIFER M	
Address:	109 NORTHPARK BLVD., STE. 125	
City-St-Zip:	COVINGTON, LA 70433	

ADDITIONS/CHANGES:

Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	

I hereby certify that the information supplied with this filing does not qualify 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 SEC 01/19/2009

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