## **2016 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P07000127869

Entity Name: CHIP'S POOL CARE INC.

**Current Principal Place of Business:** 

1450 KINGFISH LANE WINTER HAVEN, FL 33884

**Current Mailing Address:** 

P.O.BOX 1776

WINTER HAVEN. FL 33882 US

FEI Number: 26-1525875 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

BROOKENS, CHIP 1450 KINGFISH LANE WINTER HAVEN, FL 33884 US

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

FILED Mar 08, 2016

**Secretary of State** 

CC1174125092

Officer/Director Detail:

Title PVST Title PRESIDENT

NameBROOKENS, CHIP ENameBROOKENS, CHIP EAddress1450 KING FISH LANEAddress1450 KING FISH LANE

City-State-Zip: WINTER HAVEN FL 33884 City-State-Zip: WINTER HAVEN FL 33884

Title VP

Name MANER, RYAN E

Address 1450 KINGFISH LANE

City-State-Zip: WINTER HAVEN FL 33884

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: CHIP BROOKENS

PRESIDENT/CEO

03/08/2016

Electronic Signature of Signing Officer/Director Detail

Date