

**2021 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P07000128197

**Entity Name:** WELLER POOLS USA, INC.

**Current Principal Place of Business:**

1821 S ORANGE BLOSSOM TRAIL  
APOPKA, FL 32703

**Current Mailing Address:**

1821 S ORANGE BLOSSOM TRAIL  
APOPKA, FL 32703

**FEI Number: 26-1498214**

**Certificate of Status Desired: Yes**

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

BOWER, ROBERT  
1821 S ORANGE BLOSSOM TRAIL  
APOPKA, FL 32703 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: ROBERT BOWER**

**04/07/2021**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title DIRECTOR, CHAIRMAN  
Name VON WELLER, III, H. J.  
Address 1821 S ORANGE BLOSSOM TRAIL  
City-State-Zip: APOPKA FL 32703

Title DIRECTOR, CEO  
Name RUDASILL, CHRISTOPHER R  
Address 1821 S ORANGE BLOSSOM TRAIL  
City-State-Zip: APOPKA FL 32703

Title DIRECTOR, PRESIDENT  
Name TUHELA, JOHN R  
Address 1821 S ORANGE BLOSSOM TRAIL  
City-State-Zip: APOPKA FL 32703

Title CFO  
Name BOWER, ROBERT  
Address 1821 S ORANGE BLOSSOM TRAIL  
City-State-Zip: APOPKA FL 32703

Title VP, OPERATIONS  
Name SIMMONS, DANIEL  
Address 1821 S. ORANGE BLOSSOM TRAIL  
City-State-Zip: APOPKA FL 32703

Title VP  
Name LAUGHERY, SHAUN B  
Address 1821 S. ORANGE BLOSSOM TRAIL  
City-State-Zip: APOPKA FL 32703

*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: ROBERT BOWER**

**CFO**

**04/07/2021**

Electronic Signature of Signing Officer/Director Detail

Date