

**2019 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P13000097117

**Entity Name:** SUNNY POOL CARE INC.

**Current Principal Place of Business:**

630 HAMMOCK ROAD  
MELBOURNE VILLAGE, FL 32904

**Current Mailing Address:**

630 HAMMOCK ROAD  
MELBOURNE VILLAGE, FL 32904

**FEI Number:** 46-4333504

**Certificate of Status Desired:** No

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

SALMON, HEIDI  
630 HAMMOCK ROAD  
MELBOURNE VILLAGE, FL 32904 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:** HEIDI SALMON

02/11/2019

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title P/S  
Name SALMON, CHRISTOPHER  
Address 630 HAMMOCK ROAD  
City-State-Zip: MELBOURNE VILLAGE FL 32904

Title D  
Name SALMON, CHRISTOPHER  
Address 630 HAMMOCK ROAD  
City-State-Zip: MELBOURNE VILLAGE FL 32904

Title D  
Name SALMON, HEIDI  
Address 630 HAMMOCK ROAD  
City-State-Zip: MELBOURNE VILLAGE FL 32904

*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:** HEIDI A. SALMON

**DIRECTOR**

02/11/2019

Electronic Signature of Signing Officer/Director Detail

Date