

**2018 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P95000035904

**FILED**  
**Feb 23, 2018**  
**Secretary of State**  
**CC0783142764**

**Entity Name:** SUTTON'S POOL SUPPLY, INC.

**Current Principal Place of Business:**

500 W MERRITT ISLAND CSWY  
MERRITT ISLAND, FL 32952

**Current Mailing Address:**

500 W MERRITT ISLAND CSWY  
MERRITT ISLAND, FL 32952 US

**FEI Number:** 59-3316806

**Certificate of Status Desired:** No

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

SUTTON, MARK  
500 W. MERRITT ISLAND CSWY.  
MERRITT ISLAND, FL 32952 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

**Officer/Director Detail :**

Title P/D  
Name SUTTON, MARK D  
Address 500 W. MERRITT ISLAND CSWY.  
City-State-Zip: MERRITT ISLAND FL 32952

Title TREASURER, DIRECTOR  
Name SUTTON, JANICE K  
Address 500 W. MERRITT ISLAND CSWY  
City-State-Zip: MERRITT ISLAND FL 32952

Title D  
Name SUTTON, JASON M  
Address 500 W. MERRITT ISLAND CSWY  
City-State-Zip: MERRITT ISLAND FL 32952

*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:** MARK D SUTTON

**PRESIDENT**

**02/23/2018**

Electronic Signature of Signing Officer/Director Detail

Date