

**2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L05000035012

**Entity Name:** AHRENS POOL AND SPA LLC

**Current Principal Place of Business:**

3107 CORMORANT ROAD E  
DELRAY BEACH, FL 33444

**Current Mailing Address:**

3107 CORMORANT ROAD E  
DELRAY BEACH, FL 33444

**FEI Number:** 16-1725104

**Certificate of Status Desired:** No

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

SCHNEPP, HARRIET  
933 GARDENIA DRIVE  
DELRAY BEACH, FL 33483 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

**Authorized Person(s) Detail :**

Title MGR  
Name AHRENS, BRIAN  
Address 3107 CORMORANT ROAD E  
City-State-Zip: DELRAY BEACH FL 33444

Title OFFICE MANAGER  
Name SCHNEPP, HARRIET  
Address 3107 CORMORANT ROAD E  
City-State-Zip: DELRAY BEACH FL 33444

*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 a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** HARRIET SCHNEPP

**OFFICE MANAGER**

**04/06/2022**

Electronic Signature of Signing Authorized Person(s) Detail

Date