

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L08000038000

**Entity Name:** CHEMICAL POLLUTION CONTROL OF FLORIDA, LLC

**Current Principal Place of Business:**

933 FIRST AVE, SUITE 200  
KING OF PRUSSIA, PA 19406

**Current Mailing Address:**

TWO LOGAN SQUARE  
100-120 N 18TH STREET SUITE 1700  
PHILADELPHIA, PA 19103 US

**FEI Number:** 26-2247889

**Certificate of Status Desired:** Yes

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

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 32301-2525 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            TREASURER  
Name            DIAZ, JEFFREY  
Address        933 FIRST AVE, SUITE 200  
City-State-Zip: KING OF PRUSSIA PA 19406

Title            SECRETARY  
Name            KOWALCZYK, SARAH  
Address        933 FIRST AVE, SUITE 200  
City-State-Zip: KING OF PRUSSIA PA 19406

Title            PRESIDENT  
Name            BESWICK, JEFFREY  
Address        933 FIRST AVENUE  
                 SUITE 200  
City-State-Zip: KING OF PRUSSIA PA 19406

*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:** JEFFREY DIAZ

**TREASURER**

**01/29/2024**

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date