

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L13000059013

**Entity Name:** POOL CONTROL SERVICES, LLC

**Current Principal Place of Business:**

9520 S.W 202ND AVE. RD.  
DUNNELLON, FL 34431

**Current Mailing Address:**

9520 S.W 202ND AVE. RD.  
DUNNELLON, FL 34431 US

**FEI Number: 46-2730242**

**Certificate of Status Desired:** No

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

LOGOZZO, KEVIN D  
9520 S.W 202ND AVE. RD.  
DUNNELLON, FL 34431 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 MGRM  
Name LOGOZZO, KEVIN D  
Address 9520 S.W 202ND AVE. RD.  
City-State-Zip: DUNNELLON FL 34431

*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: KEVIN LOGOZZO**

**MGR/MBR**

**04/27/2023**

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

\_\_\_\_\_ Date