

2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L13000131425

Entity Name: SMITH POOL SERVICE OF WINTER HAVEN LLC

Current Principal Place of Business:

273 KINGS POND AVE
WINTER HAVEN, FL 33880

Current Mailing Address:

P O BOX 1244
EAGLE LAKE, FL 33839

FEI Number: 46-3667073

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SMITH, DAVE K
273 KINGS POND AVE
WINTER HAVEN, FL 33880 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 SMITH, DAVE K
Address P O BOX 1244
City-State-Zip: EAGLE LAKE FL 33839

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: DAVE SMITH

MGR

02/17/2015

_____ Electronic Signature of Signing Authorized Person(s) Detail

_____ Date