

**2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L15000127065

**Entity Name:** SANDS POOL SERVICE LLC

**Current Principal Place of Business:**

17153 35TH PLACE N  
LOXAHATCHEE, FL 33470

**Current Mailing Address:**

17153 35TH PLACE N  
LOXAHATCHEE, FL 33470

**FEI Number:** 47-4639537

**Certificate of Status Desired:** No

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

SANDS, JEREMY  
17153 35TH PLACE N  
LOXAHATCHEE, FL 33470 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            AMBR  
Name            SANDS, JEREMY  
Address        17153 35TH PLACE N  
City-State-Zip: LOXAHATCHEE FL 33470

Title            OFFICER  
Name            SANDS, KAILA PAMELA  
Address        17153 35TH PLACE N  
City-State-Zip: LOXAHATCHEE FL 33470

*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:** KAILA PAMELA SANDS

**OFFICER**

**03/02/2016**

Electronic Signature of Signing Authorized Person(s) Detail

Date