

2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L17000071550

Entity Name: POOL CARE OF PASCO LLC

Current Principal Place of Business:

11024 MCKINLEY DR
PORT RICHEY, FL 34668

Current Mailing Address:

11024 MCKINLEY DR
PORT RICHEY, FL 34668

FEI Number: 47-3059523

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

BUTLER, ALVIN
11024 MCKINLEY DR
PORT RICHEY, FL 34668 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	COO	Title	MANAGER, AUTHORIZED MEMBER
Name	BUTLER, SANDRA KAY	Name	BUTLER, ALVIN RAY
Address	11024 MCKINLEY DR	Address	11024 MCKINLEY DR
City-State-Zip:	PORT RICHEY FL 34668	City-State-Zip:	PORT RICHEY FL 34668

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: ALVIN RAY BUTLER

MANAGER

06/17/2020

Electronic Signature of Signing Authorized Person(s) Detail

Date