

2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L17000146503

Entity Name: POOL CARE AUTHORITY, LLC

Current Principal Place of Business:

6801 CRESCENT OAKS CIRCLE
LAKELAND, FL 33813

Current Mailing Address:

6801 CRESCENT OAKS CIRCLE
LAKELAND, FL 33813 US

FEI Number: 82-2062349

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

DRAGSTEDT, BRIAN C
6801 CRESCENT OAKS CIRCLE
LAKELAND, FL 33813 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 DRAGSTEDT, BRIAN
Address 6801 CRESCENT OAKS CIRCLE
City-State-Zip: LAKELAND FL 33813

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: BRIAN C DRAGSTEDT

OWNER

04/17/2018

_____ Electronic Signature of Signing Authorized Person(s) Detail

_____ Date