

**2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L17000222943

**Entity Name:** SCOTT'S PLUMBING OF SWFL, LLC**Current Principal Place of Business:**12960 COMMERCE LAKES DR  
SUITE A13  
FORT MYERS, FL 33913**Current Mailing Address:**12960 COMMERCE LAKES DR  
SUITE A13  
FORT MYERS, FL 33913 US**FEI Number:** 82-3222461**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**DOBBS, JOHN  
12960 COMMERCE LAKES DR  
SUITE A13  
FORT MYERS, FL 33913 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:** JOHN R DOBBS

03/03/2021

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title AMBR  
Name SCAR CAPITAL LLC  
Address 12960 COMMERCE LAKES DR  
SUITE A13  
City-State-Zip: FORT MYERS FL 33913

Title AMBR  
Name PEARTS, LLC  
Address 12960 COMMERCE LAKES DR  
SUITE A13  
City-State-Zip: FORT MYERS FL 33913

Title MANAGER  
Name DOBBS, JOHN R  
Address 12960 COMMERCE LAKES DR  
SUITE A13  
City-State-Zip: FORT MYERS FL 33913

Title MANAGER  
Name PEARCE, SCOTT R  
Address 12960 COMMERCE LAKES DR  
SUITE A13  
City-State-Zip: FORT MYERS FL 33913

Title MANAGER  
Name PEARCE, CHRISTOPHER  
Address 12960 COMMERCE LAKES DR  
SUITE A13  
City-State-Zip: FORT MYERS FL 33913

Title MANAGER  
Name BAUMAN, DENNY  
Address 12960 COMMERCE LAKES DR  
SUITE A13  
City-State-Zip: FORT MYERS FL 33913

*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:** JOHN R DOBBS

MANAGER

03/03/2021

Electronic Signature of Signing Authorized Person(s) Detail

Date