

2020 FLORIDA LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT

DOCUMENT# L19000156818

Entity Name: PELICAN POOLS LLC**Current Principal Place of Business:**14 MALAGA CT.
PALM COAST, FL 32137**Current Mailing Address:**14 MALAGA CT.
PALM COAST, FL 32137 UN**FEI Number:** 35-2666450**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**ROBLES, CARRIE
14 MALAGA CT.
PALM COAST, FL 32137 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 MGR
Name BRANTLEY, WILLIAM S
Address 6435 SW 32 ST
City-State-Zip: MIAMI FL 33155Title MRG
Name ROBLES, CARLOS
Address 14 MALAGA CT.
City-State-Zip: PALM COAST FL 32137Title MGR
Name ROBLES, DILLON
Address 14 MALAGA CT
City-State-Zip: PALM COAST FL 32137Title MGR
Name ROBLES, MATHEW
Address 164 S WINTER PARK DRIVE
City-State-Zip: CASSELBERRY FL 32707Title MGR
Name LAPORTA, JUSTIN ROBERT
Address 5889 WILLIAMSON BLVD
1405
City-State-Zip: PORT ORANGE FL 32128

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: CARLOS ROBLES

MGR

07/26/2020

Electronic Signature of Signing Authorized Person(s) Detail_____
Date