

2022 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M1000000350

Entity Name: WHITECO POOL SOLUTIONS, LLC

Current Principal Place of Business:

4501 AIRPORT DRIVE, UNIT 101
VALPARAISO, IN 46383

Current Mailing Address:

4501 AIRPORT DRIVE, UNIT 101
VALPARAISO, IN 46383 US

FEI Number: 32-0077508

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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 MEMBER
Name RICHARD J. PARKS IRREVOCABLE TRUST 002 DATED 10-10-16
Address 1000 EAST 80TH PLACE, SUITE 700 NORTH
City-State-Zip: MERRILLVILLE IN 46410

Title MEMBER
Name WHITE, CRAIG A.
Address 4501 AIRPORT DRIVE, UNIT 101
City-State-Zip: VALPARAISO IN 46383

Title MEMBER
Name PETERMAN, JOHN M.
Address 4501 AIRPORT DRIVE, UNIT 101
City-State-Zip: VALPARAISO IN 46383

Title MEMBER
Name GILLIANA, ROBERT JR
Address 1420 E. 89TH AVENUE BUILDING D-1
City-State-Zip: MERRILLVILLE IN 46410

Title MEMBER
Name GILLIANA, JASON
Address 1420 E. 89TH AVENUE BUILDING D-1
City-State-Zip: MERRILLVILLE IN 46410

Title MANAGER
Name WMB CORP.
Address 4501 AIRPORT DRIVE, UNIT 101
City-State-Zip: VALPARAISO IN 46383

Title MEMBER
Name GILLIANA, JASON
Address 4501 AIRPORT DRIVE, UNIT 101
City-State-Zip: VALPARAISO IN 46383

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: GILLIANA, JASON

MEMBER

03/21/2022

Electronic Signature of Signing Authorized Person(s) Detail

Date