

2019 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M12000002147

Entity Name: TRI-STATE POOL COVERS, LLC**Current Principal Place of Business:**26 MCKEAN AVE.
DONORA, PA 15033**Current Mailing Address:**26 MCKEAN AVE.
DONORA, PA 15033**FEI Number:** 27-0237094**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	MGRM
Name	SUPPO, JUDITH A
Address	26 MCKEAN AVE.
City-State-Zip:	DONORA PA 15033

Title	MGR
Name	SUPPO, DEL (BUSTER) MJR
Address	26 MCKEAN AVE.
City-State-Zip:	DONORA PA 15033

Title	MGRM
Name	SUPPO, JENNIFER L
Address	26 MCKEAN AVE.
City-State-Zip:	DONORA PA 15033

Title	MGRM
Name	SUPPO, DEL MSR.
Address	26 MCKEAN AVE.
City-State-Zip:	DONORA PA 15033

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: DEL SUPPO JR

VP

06/13/2019

Electronic Signature of Signing Authorized Person(s) Detail_____
Date