

**2025 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F01911

**Entity Name:** ALL SEASONS POOL SERVICE, INC.

**Current Principal Place of Business:**

185 E. AIRPORT BLVD  
SANFORD, FL 32773

**Current Mailing Address:**

185 E. AIRPORT BLVD  
SANFORD, FL 32773 US

**FEI Number:** 59-2038562

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

WATTS, JOHN N  
185 E. AIRPORT BLVD  
SANFORD, FL 32773 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

**Officer/Director Detail :**

Title PD  
Name WATTS, JOHN N  
Address 1355 BRIGHAM LOOP  
City-State-Zip: GENEVA FL 32732

Title COO  
Name GARDEN, DONALD K.  
Address 303 RACCOON ST  
City-State-Zip: LAKE MARY FL 32746

Title VP  
Name WATTS, DIANE PATRICIA  
Address 185 E. AIRPORT BLVD  
City-State-Zip: SANFORD FL 32773

Title T  
Name WATTS, JOHN N  
Address 1355 BRIGHAM LOOP  
City-State-Zip: GENEVA FL 32732

*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 an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** PAM CROWLEY

**OFFICE MANAGER**

**02/06/2025**

Electronic Signature of Signing Officer/Director Detail

Date