

2021 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P14000082327

Entity Name: CSV POOLS AND SPAS, INC.**Current Principal Place of Business:**11523 PALMBRUSH TRAIL
SUITE 304
BRADENTON, FL 34202**Current Mailing Address:**11523 PALMBRUSH TRAIL
SUITE 304
BRADENTON, FL 34202 US**FEI Number:** 47-2032327**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CARTER, MICHAEL F II
11523 PALMBRUSH TRAIL
SUITE 304
BRADENTON, FL 34202 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	P
Name	CARTER, MICHAEL F II
Address	11523 PALMBRUSH TRAIL SUITE 304
City-State-Zip:	BRADENTON FL 34202

Title	VP
Name	CARTER, CHANDRA B
Address	11523 PALMBRUSH TRAIL SUITE 304
City-State-Zip:	BRADENTON FL 34202

Title	SEC
Name	CARTER, CHANDRA B
Address	11523 PALMBRUSH TRAIL SUITE 304
City-State-Zip:	BRADENTON FL 34202

Title	TRE
Name	CARTER, MICHAEL F II
Address	11523 PALMBRUSH TRAIL SUITE 304
City-State-Zip:	BRADENTON FL 34202

Title	DIR
Name	CARTER, MICHAEL F II
Address	11523 PALMBRUSH TRAIL SUITE 304
City-State-Zip:	BRADENTON FL 34202

Title	DIR
Name	CARTER, CHANDRA B
Address	11523 PALMBRUSH TRAIL SUITE 304
City-State-Zip:	BRADENTON FL 34202

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: MICHAEL F. CARTER II**PRESIDENT****04/18/2021**_____
Electronic Signature of Signing Officer/Director Detail_____
Date