

**2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L06000096540

**Entity Name:** FLORIDA POOL FINISHERS, LLC

**Current Principal Place of Business:**

4838 LINEBAUGH AVE  
TAMPA, FL 33624

**Current Mailing Address:**

PO BOX 997  
ODESSA, FL 33556

**FEI Number:** 20-5919986

**Certificate of Status Desired:** No

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

O'ROURKE, COLLEEN  
4805 W. LAUREL STREET, SUITE 230  
TAMPA, FL 33607 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 PULEO, KIM  
Address P.O. BOX 997  
City-State-Zip: ODESSA FL 33556

Title MGRM  
Name CHARLES JOSEPH PULEO A/K/A  
JOEY PULEO  
Address PO BOX 997  
City-State-Zip: ODESSA FL 33556

*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:** CHARLES J PULEO

**MANAGER**

**04/21/2017**

Electronic Signature of Signing Authorized Person(s) Detail

Date