

**2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L14000076071

**Entity Name:** BOB'S POOL SERVICE OF ISLAMORADA LLC

**Current Principal Place of Business:**

125 MONROE DR  
BLDG 2; APT #6  
TAVERNIER, FL 33070

**Current Mailing Address:**

PO BOX 1728  
ISLAMORADA, FL 33036 US

**FEI Number:** 46-5627698

**Certificate of Status Desired:** No

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

HAMILTON, ROBERT A  
6745 ESCONDIDA DR  
WEST PALM BEACH, FL 33406 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 MGR  
Name HAMILTON, ROBERT A  
Address 6745 ESCONDIDA DR  
City-State-Zip: WEST PALM BEACH FL 33406

Title MGR  
Name HAMILTON, JOANNE A  
Address 6745 ESCONDIDA DR  
City-State-Zip: WEST PALM BEACH FL 33406

*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:** JOANNE A HAMILTON

MGR

04/03/2016

Electronic Signature of Signing Authorized Person(s) Detail

Date