

2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L18000194153

Entity Name: SUMMERLIN'S POOL SERVICE

Current Principal Place of Business:

4001 S EDGEWATER CIR
LABELLE FL, FL 33935

Current Mailing Address:

4001 S EDGEWATER CIR
LABELLE FL, FL 33935 US

FEI Number: 83-1557984

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SUMMERLIN, COLTON M
4001 S EDGEWATER CIR
LABELLE, FL 33935 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 MANAGER
Name SUMMERLIN, COLTON MORRIS
Address 4001 S EDGEWATER CIR
City-State-Zip: LABELLE FL 33935

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: COLTON SUMMERLIN

05/25/2020

Electronic Signature of Signing Authorized Person(s) Detail

Date