## 2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L19000120044

Entity Name: FLAMINGO POOL CARE, LLC

**Current Principal Place of Business:** 

8466 LOCKWOOD RIDGE RD,

SUITE 175

SARASOTA, FL 34243

**Current Mailing Address:** 

8466 LOCKWOOD RIDGE RD, SUITE 175

SARASOTA, FL 34243 US

FEI Number: NOT APPLICABLE Certificate of Status Desired: No

Name and Address of Current Registered Agent:

MISKA, KEVIN CPA 6905 44TH CT E SARASOTA, FL 34243 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: KEVIN MISKA 01/05/2024

Electronic Signature of Registered Agent

Date

FILED Jan 05, 2024

**Secretary of State** 

3662353433CC

Authorized Person(s) Detail:

Title MGR Title MGR

Name HARRIGAN, CHRISTOPHER J MR. Name HARRIGAN, SARAH E MRS.

Address 6905 44TH CT E Address 6905 44TH CT E

City-State-Zip: SARASOTA FL 34243 City-State-Zip: SARASOTA FL 34243

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.