

2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L19000252766

Entity Name: TRIDENT POOL SOLUTIONS, LLC.

Current Principal Place of Business:

5061 SE 140TH ST
SUMMERFIELD, FL 34491

Current Mailing Address:

PO BOX 1915
BELLEVIEW, FL 34421 US

FEI Number: 84-3246127

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

HUGHES, SHAWN K
5061 SE 140TH ST
SUMMERFIELD, FL 34491 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 HUGHES, SHAWN K
Address 5061 SE 140TH ST
City-State-Zip: SUMMERFIELD FL 34491

Title AMBR
Name HUGHES, LISA A
Address 5061 SE 140TH ST
City-State-Zip: SUMMERFIELD FL 34491

Title AMBR
Name HUGHES, HOLLY A
Address 5061 SE 140TH ST
City-State-Zip: SUMMERFIELD FL 34491

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: SHAWN HUGHES

MANAGER/OWNER

02/26/2020

Electronic Signature of Signing Authorized Person(s) Detail

Date