

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L23000521189

**Entity Name:** AA POOL SUPPLY FL LLC

**Current Principal Place of Business:**

114 POLO PARK EAST BLVD  
STE 140  
DAVENPORT, FL 33897

**Current Mailing Address:**

1160 HERON SOUND DR  
APOPKA, FL 32703 US

**FEI Number:** 93-4557546

**Certificate of Status Desired:** No

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

GTZ SOLUTIONS LLC  
1160 HERON SOUND DR  
APOPKA, FL 32703 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	Title	AMBR
Name	DE CASSIA SOUSA LIZ, RITA	Name	ULTRACHLORINE CORPORATION
Address	1621 MORNING DOVE	Address	1621 MORNING DOVE
City-State-Zip:	AUBREY TX 76227	City-State-Zip:	AUBREY TX 76227

*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:** RITA DE CASSIA SOUSA LIZ

**MGR**

**04/30/2024**

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date