

2017 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M02000000133

Entity Name: SUPERIOR POOL PRODUCTS LLC**Current Principal Place of Business:**109 NORTHPARK BLVD
COVINGTON, LA 70433**Current Mailing Address:**109 NORTHPARK BLVD
COVINGTON, LA 70433 US**FEI Number:** 33-0913896**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301-2525 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 PEREZ DE LA MESA, MANUEL J
Address 109 NORTHPARK BLVD.
City-State-Zip: COVINGTON LA 70433

Title MGR
Name JOSLIN, MARK W
Address 109 NORTHPARK BLVD.
City-State-Zip: COVINGTON LA 70433

Title MGR
Name COOK, A. DAVID
Address 109 NORTHPARK BLVD.
City-State-Zip: COVINGTON LA 70433

Title MGR
Name BABCO, TIMOTHY
Address 109 NORTHPARK BLVD.
City-State-Zip: COVINGTON LA 70433

Title MGR
Name NEIL, JENNIFER M
Address 109 NORTHPARK BLVD.
City-State-Zip: COVINGTON LA 70433

Title MGR
Name HOUSEY HART, MELANIE
Address 109 NORTHPARK BLVD.
City-State-Zip: COVINGTON LA 70433

Title MGR
Name ST. ROMAIN, KENNETH G
Address 109 NORTHPARK BLVD., 4TH FL.
City-State-Zip: COVINGTON LA 70433

Title MGR
Name WILLIAMS, DONNA
Address 109 NORTHPARK BLVD
City-State-Zip: COVINGTON LA 70433

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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: JENNIFER M. NEIL**MANAGER****03/24/2017**

Electronic Signature of Signing Authorized Person(s) Detail

Date

Authorized Person(s) Detail Continued :

Title MGR
Name POSTOLL, RICHARD
Address 109 NORTHPARK BLVD
City-State-Zip: COVINGTON LA 70433

Title MGR
Name ARVAN, PETER D.
Address 109 NORTHPARK BLVD
City-State-Zip: COVINGTON LA 70433