

**2016 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F99000001215

**Entity Name:** PENTAIR WATER POOL AND SPA, INC.

**Current Principal Place of Business:**

1620 HAWKINS AVENUE  
SANFORD, NC 27330

**FILED**  
**Apr 04, 2016**  
**Secretary of State**  
**CC6902607391**

**Current Mailing Address:**

5500 WAYZATA BLVD  
SUITE 600  
MINNEAPOLIS, MN 55416 US

**FEI Number:** 95-2744829

**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

**Officer/Director Detail :**

Title DIRECTOR  
Name JILEK, ANGELA D  
Address 5500 WAYZATA BLVD  
SUITE 600  
City-State-Zip: MINNEAPOLIS MN 55416

Title DIRECTOR, TREASURER  
Name BORIN, MARK  
Address 5500 WAYZATA BLVD  
SUITE 600  
City-State-Zip: MINNEAPOLIS MN 55416

Title DIRECTOR, PRESIDENT  
Name FRYKMAN, KARL  
Address 5500 WAYZATA BLVD  
SUITE 600  
City-State-Zip: MINNEAPOLIS MN 55416

Title ASST. SECRETARY  
Name BOONE, ANTHONY  
Address 5500 WAYZATA BLVD  
SUITE 600  
City-State-Zip: MINNEAPOLIS MN 55416

Title SECRETARY  
Name STOKES, JASON  
Address 5500 WAYZATA BLVD  
SUITE 600  
City-State-Zip: MINNEAPOLIS MN 55416

Title VP OPERATIONS  
Name LARKIN, DIANE  
Address 5500 WAYZATA BLVD  
SUITE 600  
City-State-Zip: MINNEAPOLIS MN 55416

Title VP FINANCE  
Name MILLER, ROBERT  
Address 5500 WAYZATA BLVD  
SUITE 600  
City-State-Zip: MINNEAPOLIS MN 55416

Title VP MARKETING AND PRODUCT  
DEVELOPMENT  
Name DELAMO, CARLOS  
Address 5500 WAYZATA BLVD  
SUITE 600  
City-State-Zip: MINNEAPOLIS MN 55416

**Continues on page 2**

*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 an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** JASON STOKES

**SECRETARY**

**04/04/2016**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date

**Officer/Director Detail Continued :**

Title           VP SALES  
Name           ZORN, STEVE  
Address        5500 WAYZATA BLVD  
                  SUITE 600  
City-State-Zip: MINNEAPOLIS MN 55416