



State of Rhode Island and Providence Plantations  
Office of the Secretary of State

Fee: \$50.00

Division Of Business Services  
148 W. River Street  
Providence RI 02904-2615  
(401) 222-3040

Limited Liability Company  
Annual Report

Filing Period: September 1 - November 1

In accordance with R.I.G.L. 7-16-66(d), each limited liability company failing or refusing to file its annual report within thirty (30) days after the time prescribed by law (R.I.G.L. 7-16-66(b&c)) is subject to a penalty fee of \$25.00.

ANNUAL REPORT YEAR: 2015

1. ID No. 000790601

2. Exact Name of the Limited Liability Company Aqua Comfort Technologies LLC

3. State of Formation

State: MD

4. Brief Description of the Character of the Business Which is Actually Conducted in Rhode Island

Sales and distribution of swimming pool heat pumps

5. Principal Office Address

No. and Street: 8 FAIRFIELD BLVD.  
SUITE 115

City or Town: WALLINGFORD State: CT Zip: 06492 Country: USA

6. Mailing Address of Limited Liability Company and Name or Title of Contact Person:

Contact Name: BARBARA COLLINS Contact Title: ACCOUNTING MANAGER

No. and Street: 8 FAIRFIELD BOULEVARD, SUITE 115

City or Town: WALLINGFORD State: CT Zip: 06492 Country: USA

7. Name and Address of Each Manager of the Limited Liability Company, if Applicable.  
DO NOT LIST MEMBERS

Title	Individual Name First, Middle, Last, Suffix	Address Address, City or Town, State, Zip Code, Country
MANAGER	THE UPTECH TRUST C/O CBIZ MHM LLC ATTN BRIAN COHEN	1675 N. MILITARY TRAIL 5TH FLOOR BOCA RATON, FL 33486 USA
MANAGER	DAVID J RYBACKI	8 FAIRFIELD BLVD, SUITE 115 WALLINGFORD, CT 06492 USA
MANAGER	MARK COLEMAN	8 FAIRFIELD BLVD, SUITE 115 WALLINGFORD, CT 06492 USA
MANAGER	TIM HART	520 HWY. 17 SOUTH, UNIT F SURFSIDE BEACH, SC 29575 USA

**8. RESIDENT AGENT IN RHODE ISLAND - DO NOT ALTER  
Changes Require Filing of Form 642 - R.I.G.L. 7-16-11**

INCORP SERVICES, INC. 222 JEFFERSON BOULEVARD, SUITE 200 WARWICK , RI 02888

**9. This report must be executed by an authorized person pursuant to R.I.G.L. 7-16-66 (b).**

**Signed this 24 Day of September, 2015 at 9:27:52 AM by the authorized person. *This electronic signature of the individual or individuals signing this instrument constitutes the affirmation or acknowledgement of the signatory, under penalties of perjury, that this instrument is that individual's act and deed or the act and deed of the company, and that the facts stated herein are true, as of the date of the electronic filing, in compliance with R.I. Gen. Laws § 7-16.***

By BARBARA COLLINS  
Signature of Authorized Person

Form No. 632  
Revised 09/07

© 2007 - 2015 State of Rhode Island and Providence Plantations  
All Rights Reserved