

**2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L20000036020

**Entity Name:** BILLY CALIFANO LLC

**Current Principal Place of Business:**

7836 TWIN LAKES ROAD  
KEYSTONE HEIGHTS, FL 32656

**Current Mailing Address:**

7836 TWIN LAKES ROAD  
KEYSTONE HEIGHTS, FL 32656

**FEI Number:** 84-4723815

**Certificate of Status Desired:** No

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

CALIFANO, WILLIAM J  
7836 TWIN LAKES ROAD  
KEYSTONE HEIGHTS, FL 32656 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 CALIFANO, WILLIAM J  
Address 7836 TWIN LAKES ROAD  
City-State-Zip: KEYSTONE HEIGHTS FL 32656

Title AUTHORIZED MEMBER  
Name FOSTER, CAMERON SCOTT  
Address 7829 STATE RD 100  
#25  
City-State-Zip: KEYSTONE HEIGHTS FL 32656

*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:** WILLIAM J. CALIFANO

MGR

04/22/2021

Electronic Signature of Signing Authorized Person(s) Detail

Date