

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000020360

Entity Name: CALUSA PARTNERS LLC

FILED  
Apr 25, 2007  
Secretary of State

**Current Principal Place of Business:**

9428 BANDERA LANE  
PORT CHARLOTTE, FL 33981

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 1511  
ENGLEWOOD, FL 342951511

**New Mailing Address:**

FEI Number: 20-0877929

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

FRENCH, H. WELLS  
9428 BANDERA LANE  
PORT CHARLOTTE, FL 33981 US

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

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

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: AHLRICH, STEPHEN L  
Address: 4115 CAPE HAZE DR.  
City-St-Zip: PLACIDA, FL 33946

Title: MGRM ( ) Delete  
Name: FRENCH, H. WELLS  
Address: 9428 BANDERA LANE  
City-St-Zip: PORT CHARLOTTE, FL 33981

Title: MGRM ( ) Delete  
Name: MALLEK, CHARLES M  
Address: 2700 NORTH BEACH ROAD UNIT E 202  
City-St-Zip: ENGLEWOOD, FL 33947

Title: MGRM ( ) Delete  
Name: HAMEL, ROBERT P  
Address: 38 MEDALIST CIR.  
City-St-Zip: ROTUNDA WEST, FL 33947

Title: MGRM ( ) Delete  
Name: MILLER, THOMAS A  
Address: 2700 NORTH BEACH ROAD UNIT B 201  
City-St-Zip: ENGLEWOOD, FL 34223

**ADDITIONS/CHANGES:**

Title: MGRM (X) Change ( ) Addition  
Name: ROCHNICH, MIRKO  
Address: 2700 NORTH BEACH RD, UNIT E205  
City-St-Zip: ENGLEWOOD, FL 34223

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this 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 608, Florida Statutes.

SIGNATURE: H WELLS FRENCH

MGRM

04/25/2007

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date