

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Mar 24, 2006 8:00 am
Secretary of State

03-24-2006 90222 028 ****50.00

DOCUMENT # L05000060021	
1. Entity Name CALYPSO COVE, LLC	

Principal Place of Business 2222 SECOND STREET FORT MYERS, FL 33901	Mailing Address 2222 SECOND STREET FORT MYERS, FL 33901
---	---

2. Principal Place of Business ABOVE		3. Mailing Address ABOVE	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

02232006 Chg-LLC CR2E083 (11/05)

4. FEI Number
72-1601444

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$5.00 Additional Fee Required**

6. Name and Address of Current Registered Agent BRETT, JAY A 9100 COLLEGE POINTE COURT FORT MYERS, FL 33919		7. Name and Address of New Registered Agent Name N/A Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
---	--	---	--

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE **N/A**
Signature, typed or printed name of registered agent and fee if applicable. (NOTE: Registered Agent signature required when registering) DATE

**Filing Fee is \$50.00
Due by May 1, 2006**

**Make check payable to
Florida Department of State**

9. MANAGING MEMBERS/MANAGERS		10. ADDITIONS/CHANGES	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM CRAY, SCOTT, D 2222 SECOND STREET FORT MYERS, FL 33901 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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: **Scott D. Cray** **2-23-06 (239) 437-5255**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #



ATTACHMENT
20020567
Division of Corporations

2006 Annual Report

**Listed below is the most recent information reported for the entity.
Please review and click the appropriate button at the bottom to generate the annual report form.**

This information cannot be changed on the report.	
Document Number	L05000060021
Business Entity Name	CALYPSO COVE, LLC
Original File Date	06/16/2005

FEI Number

Principal Address 2222 SECOND STREET
FORT MYERS, FL 33901

Mailing Address 2222 SECOND STREET
FORT MYERS, FL 33901

Registered Agent JAY A BRETT
9100 COLLEGE POINTE COURT
FORT MYERS, FL 33919 US

Managing Member/Manager Name And Address

MGRM
SCOTT D CRAY
2222 SECOND STREET
FORT MYERS, FL 33901



Sunbiz Home Page

Help