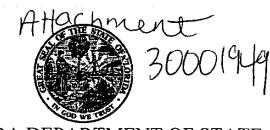
## 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT (AR)

## Secretary of State DOCUMENT # L05000090897 02-16-2006 90146 033 \*\*\*\*50.00 1. Entity Name CALUSA INVESTMENTS, LLC Principal Place of Business Mailing Address 30001949 P.O. BOX 1794 MARCO ISLAND FL 34145 724 NAUTILUS CT MARCO ISLAND FL 34145 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apr. #, etc. 1st MOORE CR2E083 (10/05) City & State Applied For City & State Not Applicable Zip Country Zip Country \$5.00 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name COUTURE, CRAIG Street Address (P.O. Box Number is Not Acceptable) 1112 1/2 N COLLIER BLVD MARCO ISLAND FL 34145 City 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 Separative hybrid or printed name of negotiers again find bits of unbeddets (NOTE: Нережиная Ариля эфицина герплем міжті (вілешві д) CATE FILE NOW!!!! FEE IS \$50.00 Make Check Payable to Florida Department of State Due By May 1, 2006 MANAGING MEMBERS/MANAGERS ADDITIONS/CHANGES 10. 9. TITLE MGRÍM ☐ Delete TITLE ☐ Change ☐ Addition NAME STOLLER, GERALD NAME STREET ADDRESS STREET ADDRESS 724 NAUTILUS CT C2TY-ST-7IP MARCO ISLAND FL 34145 CITY-S1-7/P me · MGRM Delete DUE ☐ Change ■ Addition NAME MALERBA, VINCENT NAME STREET ADDRESS STREET ADDRESS 1630-WINDMILL AVE CITY-ST-ZIP CITY-ST. 2P MARCO ISLAND FL 34145 Oefete TITLE Change | ☐ Addition TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete DILE Charlos ■ Addition TITLE SZEROTA TERRES STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Delete DILE ☐ Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY - ST - ZIP CITY-ST-ZIP ıme Delate MILE ☐ Chance ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZP CITY-ST-ZIP 11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutos. 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 flability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

G MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

**FILED** 

Mar 08, 2006 8:00 am



## FLORIDA DEPARTMENT OF STATE Division of Corporations

February 20, 2006

CALUSA INVESTMENTS, LLC P.O. BOX 1794 MARCO ISLAND, FL 34145

Subject: CALUSA INVESTMENTS, LLC

Reference Number:

L05000090897

Please be advised, we have received your annual report/uniform business report and your check(s) totaling \$50.00; however, the report <u>has not been filed</u> and a copy is being returned for the following correction(s):

Please complete Block 4 by entering your Federal Employer Identification (FEI) number or by checking the appropriate box. If "APPLIED FOR" is preprinted in Block 4, you MUST now provide the FEI number. A Social Security number is not considered to be the same as the FEI number. For FEI number assistance, call the IRS at (800) 829-1040.

After the corrections have been made, please return the report to: Division of Corporations, P.O. Box 6478, Tallahassee, Florida 32314 within 30 days from the date of this letter.

If you have additional questions or need further assistance, please call the Division of Corporations at (850) 245-6051.

/ms ANNUAL REPORTS SECTION