

2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000080005

Entity Name: CARISSA CYPRESS ASSOCIATES, LLC

Current Principal Place of Business:

16770 ORIOLE ROAD
SUITE 1
FORT MYERS, FL 33912

Current Mailing Address:

16770 ORIOLE ROAD
SUITE 1
FORT MYERS, FL 33912 US

FEI Number: 68-0613748

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

KORN, JASON H
9110 STRADA PLACE
SUITE 6200
NAPLES, FL 34108 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: JASON H KORN

01/29/2024

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title MGR
Name MCGARVEY, JOHN S
Address 16770 ORIOLE ROAD
SUITE 1
City-State-Zip: FORT MYERS FL 33912

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: JOHN S MCGARVEY

MANAGER

01/29/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date