

**2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L09000037420

**Entity Name:** YACHT HAVEN AND FOREST ACRES, LLC

**Current Principal Place of Business:**

C/O CUMMINGS & LOCKWOOD LLC  
8000 HEALTH CENTER BLVD. SUITE 300  
BONITA SPRINGS, FL 34135

**Current Mailing Address:**

C/O CUMMINGS & LOCKWOOD LLC  
8000 HEALTH CENTER BLVD. SUITE 300  
BONITA SPRINGS, FL 34135 US

**FEI Number:** NOT APPLICABLE

**Certificate of Status Desired:** No

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

CLASP, INC.  
3001 TAMIAMI TRAIL N.  
SUITE 400  
NAPLES, FL 34103 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 LAUFER, WAYNE L  
Address 4989 JOEWOOD DRIVE  
City-State-Zip: SANIBEL FL 33957

*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:** WAYNE L LAUFER

**MANAGER**

**04/29/2021**

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date