## 2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L15000108961

Entity Name: CARVERS COVE LLC

**Current Principal Place of Business:** 

9163 POINT CYPRESS DRIVE ORLANDO. FL 32836

**Current Mailing Address:** 

9163 POINT CYPRESS DRIVE ORLANDO, FL 32836

FEI Number: 47-4341057 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SAFT, JARED R 9163 POINT CYPRESS DR ORLANDO, FL 32836 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.

Title

MGR

SIGNATURE:

Electronic Signature of Registered Agent

Date

Date

FILED Jan 26, 2019

**Secretary of State** 

9953120250CC

Authorized Person(s) Detail:

Title MGR

Name SAFT, JARED R Name GISSY, JAMES L

Address 9163 POINT CYPRESS DR Address 9259 POINT CYPRESS DRIVE

City-State-Zip: ORLANDO FL 32836 City-State-Zip: ORLANDO FL 32836

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: JARED SAFT MANAGER 01/26/2019