

2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L18000221909

Entity Name: CALUSA RECOVERY SERVICES LLC

Current Principal Place of Business:

15611 NEW HAMPSHIRE CT,
STE A
FORT MYERS, FL 33908

Current Mailing Address:

15611 NEW HAMPSHIRE CT,
STE A
FORT MYERS, FL 33908 US

FEI Number: 83-1964547

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SMITH, SAWYER C
1415 HENDRY ST
FORT MYERS, FL 33901 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 CALUSA RECOVERY, LLC
Address 15611 NEW HAMPSHIRE CT SUITE A
City-State-Zip: FORT MYERS FL 33908

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: WILBUR SMITH

OWNER

02/05/2020

Electronic Signature of Signing Authorized Person(s) Detail

Date