

**2026 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L24000296149

**Entity Name:** CAB6 LLC

**Current Principal Place of Business:**

295 FLORIDA BLVD  
CRYSTAL BEACH, FL 34681

**Current Mailing Address:**

PO BOX 854  
CRYSTAL BEACH, FL 34681

**FEI Number:** 99-3860224

**Certificate of Status Desired:** No

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

BRIDGESPAN PARTNERS LLC  
2134 ALT 19  
SUITE B  
PALM HARBOR, FL 34683 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	AMBR	Title	MGR
Name	BLAIR, CALLAHAN	Name	BLAIR, DAVID
Address	295 FLORIDA BLVD, BOX 854	Address	295 FLORIDA BLVD, BOX 854
City-State-Zip:	CRYSTAL BEACH FL 34681	City-State-Zip:	CRYSTAL BEACH FL 34681

*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:** DAVID BLAIR

**OWNER**

**04/27/2026**

Electronic Signature of Signing Authorized Person(s) Detail

Date