2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L02000034336

1. Entity Name

GRASSY KEY MARINA OF MARATHON, LLC



FILED Apr 28, 2005 08:00 AM Secretary of State

Principal Place of Business
59075 OVERSEAS HIGHWAY
MARATHON, FL 33050

Mailing Address

3250 MARY STREET

501

DO NOT WRITE IN THIS SPACE

COCONUT GROVE, FL 33133



02222005 No Chg-LLC

CR2E083 (10/03)

4. FEI Number 92-0185735

Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

MELAND RUSSIN HELLINGER & BUDWICK, P.A. 200 SOUTH BISCAYNE BLVD STE 3000 MIAMI, FL 33131

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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE.

Signature, typed or printed name of registered agent and title if applicable

(NOTE Registered Agent signature required when reinstaling)

DATE

Filing Fee is \$50.00 Due by May 1, 2005 U00000339929 04/28/05-80091-012 50.00

9.	MANAGING MEMBERS/MANAGERS
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM BERMAN, DANA 3250 MARY STREET STE 501 MIAMI, FL 33133
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM SCHWARTZ, DAREN 3250 MARY STREET STE 501 MIAMI, FL 33133
11TLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM DAVIS, DON 59073 OVERSEAS HIGHWAY MARATHON, FL 33050
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE	

DO NOT WRITE IN THIS SPACE

11. I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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 608, Florida Statutes.

SIGNATURE:

NAME STREET ADDRESS CITY-ST-ZIP

D4-26.2005

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone *