2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000019775

Entity Name: 1009 SIMONTON STREET, LLC

FILED Apr 28, 2004 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

624 WHITEHEAD STREET
KEY WEST, FL 33040

1009 SIMONTON STREET
KEY WEST, FL 33040

KEY WEST, FL 33040

Current Mailing Address: New Mailing Address:

624 WHITEHEAD STREET 1009 SIMONTON STREET KEY WEST, FL 33040 KEY WEST, FL 33040

FEI Number: FEI Number Applied For (X) FEI Number Not Applicable () Certificate of Status Desired ()

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

KLITENICK, RICHARD M ESQ
624 WHITEHEAD STREET
KEY WEST, FL 33040

KLITENICK, RICHARD M ESQ
1009 SIMONTON STREET
KEY WEST, FL 33040

KLITENICK, RICHARD M ESQ
1009 SIMONTON STREET
KEY WEST, FL 33040

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: RICHARD M. KLITENICK 04/28/2004

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MEMBERS: A

Title: MGR () Delete
Name: KLITENICK, RICHARD M

Name: KLITENICK, RICHARD M
Address: 624 WHITEHEAD STREET
City-St-Zip: KEY WEST, FL 33040

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: KLITENICK, RICHARD M
Address: 1009 SIMONTON STREET
City-St-Zip: KEY WEST, FL 33040

I hereby certify that the information supplied with this filing does not qualify for the 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 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 608, Florida Statutes.

SIGNATURE: RICHARD M. KLITENICK MGRM 04/28/2004