

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L11000092600

**FILED**  
**Apr 29, 2012**  
**Secretary of State**

**Entity Name:** KEY HAVEN MANAGEMENT GROUP, LLC

**Current Principal Place of Business:**

4113 NW 68TH DRIVE  
GAINESVILLE, FL 32606

**New Principal Place of Business:**

5109 NW 39TH AVENUE, SUITE F  
GAINESVILLE, FL 32606

**Current Mailing Address:**

4113 NW 68TH DRIVE  
GAINESVILLE, FL 32606

**New Mailing Address:**

**FEI Number:** 61-1657502      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

RAMOS, RUBEN  
4113 NW 68TH DRIVE  
GAINESVILLE, FL 32606      US

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

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

**MANAGING MEMBERS/MANAGERS:**

**Title:** MGR  
**Name:** RAMOS, RUBEN  
**Address:** 4113 NW 68TH DRIVE  
**City-St-Zip:** GAINESVILLE, FL 32606

**Title:** MGR  
**Name:** RAMOS, ROSE  
**Address:** 4113 NW 68TH DRIVE  
**City-St-Zip:** GAINESVILLE, FL 32606

I hereby 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: RUBEN RAMOS

MGR

04/29/2012

\_\_\_\_\_  
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date