## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# H64066

Title:

Name:

Address:

City-St-Zip:

RESORTS OF KEY LARGO. INC

FILED Jun 16, 2008 Secretary of State

| Entity Nan                                    | ne: RESORIS  | S OF KEY LARGO, INC.  |   |  |  |
|---|--|---|---|--|--|
| Current Principal Place of Business:          |  |   | New Principal Place                         | New Principal Place of Business:             |  |
|   | ERSEAS HIGH<br>O, FL 33037                             | NAY   |   |  |  |
| Current Mailing Address:                      |  |   | New Mailing Address:                        |  |  |
|   | ANERA ROAD<br>ABLES, FL 331                            | 43  |   |  |  |
| FEI Number:                                   | 59-2572460   | FEI Number Applied For ( )  | FEI Number Not Applicable ( )               | Certificate of Status Desired ( )            |  |
| Name and Address of Current Registered Agent: |  |   | Name and Address                            | Name and Address of New Registered Agent:    |  |
| 427 COSTA                                     | MICHAEL R F<br>ANERA ROAD<br>ABLES, FL 331             |   |   |  |  |
| The above in the State                        |  | ubmits this statement for the p                                       | urpose of changing its registere            | ed office or registered agent, or both,      |  |
| SIGNATUR                                      |  |   |   |  |  |
| Electronic Signature of Registered Agent      |  |   | nt  | Date   |  |
|   |  | (2)(b), F.S., the corporation did not<br>Trust Fund Contribution ( ). | receive the prior notice.                   |  |  |
| OFFICERS AND DIRECTORS:                       |  |   | ADDITIONS/CHANG                             | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: |  |
| Title:<br>Name:<br>Address:<br>City-St-Zip:   | PD ()<br>DENAULT, MICH<br>427 COSTANER<br>CORAL GABLES | A ROAD  | Title:<br>Name:<br>Address:<br>City-St-Zip: | ( ) Change ( ) Addition                      |  |
| Title:<br>Name:<br>Address:<br>City-St-Zip:   | D ()<br>DENAULT, CHR<br>427 COSTANER<br>CORAL GABLES   | A ROAD  | Title:<br>Name:<br>Address:<br>City-St-Zip: | ( ) Change ( ) Addition                      |  |
| Title:<br>Name:<br>Address:<br>City-St-Zip:   | D ()<br>DENAULT, STER<br>427 COSTANER<br>CORAL GABLES  | A ROAD  | Title:<br>Name:<br>Address:<br>City-St-Zip: | ( ) Change ( ) Addition                      |  |

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

Title:

Name:

Address:

City-St-Zip:

SIGNATURE: MICHAEL R. DENAULT PRES 06/16/2008

() Delete

DENAULT, ALEXANDRE

427 COSTANERA ROAD

CORAL GABLES, FL 33143

() Change () Addition