FILED
May 31, 2005 8:00 am
Secretary of State
05-04-2005 90035 005 ****55.00

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L00000013286

1. Entity Name
DION'S QUIK MARTS, LLC

30008134

Principal Place of Business	Mailing Address
638 UNITED ST. KEY WEST, FL 33040	PO BOX 1209 KEY WEST, FL 33041-1209

04192005No Chg-LLC CR2E083 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
65-1049125
☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **$5.00** Additional Fee Required

6. Name and Address of Current Registered Agent

~~DION, LAWRENCE R~~
~~638 UNITED ST.~~
~~KEY WEST, FL 33040~~
RAMPELL, PAUL
400 ROYAL PALM WAY
SUITE 410
PALM BEACH, FL 33480

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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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

Filing Fee is $50.00
Due by May 1, 2005

9. MANAGING MEMBERS/MANAGERS

TITLE	~~MGR~~
NAME	~~DION, LAWRENCE R~~
STREET ADDRESS	~~638 UNITED ST.~~
CITY-ST-ZIP	~~KEY WEST, FL 33040~~
TITLE	MGRM
NAME	DION PARTNERSHIP LTD
STREET ADDRESS	638 UNITED ST
CITY-ST-ZIP	KEY WEST, FL 33040
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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11. I hereby certify that the information supplied with this filing 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: Suzanne D Banks SUZANNE D. BANKS 4-29-05 305-296-2000
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #