

# **2005 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L01000014033

**FILED**  
**Mar 02, 2005**  
**Secretary of State**

**Entity Name:** MARQUESA REALTY OF THE FLORIDA KEYS L.L.C.

**Current Principal Place of Business:**

402 APPELROUTH LANE  
KEY WEST, FL 33040

**New Principal Place of Business:**

739 OLIVIA STREET  
KEY WEST, FL 33040

**Current Mailing Address:**

402 APPELROUTH LANE  
KEY WEST, FL 33040

**New Mailing Address:**

PO BOX 6091  
KEY WEST, FL 33041

**FEI Number:** 65-1131464

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

BROWNING, MICHAEL L ESQUIRE  
402 APPELROUTH LANE  
KEY WEST, FL 33040 US

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

DE MILLY, WALTER A III  
PO BOX 6091  
KEY WEST, FL 33041 US

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: WALTER A DE MILLY, III

03/02/2005

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MEMBERS:**

Title: MGR ( ) Delete  
Name: DE MILLY, WALTER  
Address: PO BOX 6091  
City-St-Zip: KEY WEST, FL 330416091

**ADDITIONS/CHANGES:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: WALTER A DE MILLY, III

MM

03/02/2005

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