

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L01000018217

**FILED**  
**Mar 29, 2010**  
**Secretary of State**

**Entity Name:** LEATHER MASTER OF KEY WEST, LLC

**Current Principal Place of Business:**

418 APPELROUTH LANE  
KEY WEST, FL 33040

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 5501  
KEY WEST, FL 33045

**New Mailing Address:**

**FEI Number:** 65-1150623

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

KAUFMAN, SAMUEL J  
1509 JOSEPHINE ST  
KEY WEST, FL 33040 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: CORELLA, PASQUALE J  
Address: PO BOX 5501  
City-St-Zip: KEY WEST, FL 33045 US

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: PASQUALE J CORELLA

MGR

03/29/2010

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