2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Feb 08, 2007
Secretary of State

DOCUMENT# L02000006620

Entity Name: KEY LARGO BAREFOOT ADVENTURES, LLC

Current Principal Place of Business:

P.O. BOX 3144
KEY LARGO, FL 33037

New Principal Place of Business:

159 JASMINE STREET
TAVERNIER, FL. 33070

Current Mailing Address:

P.O. BOX 3144
KEY LARGO, FL 33037

New Mailing Address:

FEI Number: 02-0600674 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

A1A REGISTERED AGENT INC.
92 SADBERRY ROAD
QUINCY, FL 323510000 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: MGRM ( ) Delete
Name: SWENSSON, JASON
Address: P.O. BOX 3144
City-St-Zip: KEY LARGO, FL 33037

Title: MGRM ( ) Delete
Name: SWENSSON, DEBRA
Address: P.O. BOX 3144
City-St-Zip: KEY LARGO, FL 33037

ADDITIONS/CHANGES:

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

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 Chapter 119, 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: JASON SWENSSON MGRM 02/08/2007

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