2004 LIMITED LIABILITY COMPANY ANNUAL REPORT (AR)

Jan 28, 2004 08:00 AM DOCUMENT # L02000017655 **Secretary of State** 1. Entity Name WELCOMEHOME KEY WEST, L.L.C. Principal Place of Business Mailing Address 2926 N ROOSEVELT BLVD 2926 N ROOSEVELT BLVD KEY PLAZA KEY WEST FL 33040 KEY PLAZA KEY WEST FL 33040 2. Principal Place of Business 3. Mailing Address Suite, Apt #, etc. Suite, Apt. #, etc. CR2E083 (11/03) City & State City & State Applied For 4. FEI Number 47-0876643 Not Applicable Zιο Country Zip Country \$5.00 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent BROWNING, MICHAEL L 402 APPELROUTH LANE KEY WEST FL 33040 Street Address (P.O. Box Number is Not Acceptable) City Zip Code 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 | am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or printed name of registerod agent and title if applicable (NOTE Registerod Agent signature required when reinstating) FILE NOW!!! FEE IS \$50.00 Make Check Payable to Florida Department of State Due By May 1, 2004 9. MANAGING MEMBERS/MANAGERS 10. ADDITIONS/CHANGES TITLE MGR TETLE Change Addition ☐ Octete COVENY, TERRY NAME NAME U000000017179 STREET ADDRESS 2926 N ROOSEVELT BLVD STREET ADDRESS 01/28/04-80084-022 50.00 CITY-ST-ZIP KEY WEST FL 33040 CITY - ST - ZIP TITLE Detete BILE Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-782 CITY-ST-ZIP TITLE Delete TITLE Change ☐ Addition 3MAST NAME STREET ADDRESS STREET ADDRESS CRTY-ST-ZIP City-St-7iP ☐ Delete TITLE Chance Addition BILE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CHY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change Addition NAME MARKE STREET ADDRESS STREET ADDRESS CHY-SI-ZIP CITY - ST - ZIP THE BILE Delete ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119,07(3)(f), 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.

Terry Coveny

SIGNATURE

FILED

1/22/04 (305) 292-4004