

**2008 LIMITED LIABILITY COMPANY  
ANNUAL REPORT**

**FILED**  
**May 08, 2008 08:00 AM**  
**Secretary of State**

**DOCUMENT # L03000003460**

1. Entity Name

**KEY INVESTMENT GROUP LLC**



Principal Place of Business

**25000 OVERSEAS HWY  
SUMMERLAND KEY, FL 33042**

Mailing Address

**P.O. BOX 421075  
SUMMERLAND KEY, FL 33042**



04252008 No Chg-LLC

CR2E083 (12/07)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number

**33-1039639**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$5.00 Additional  
Fee Required**

6. Name and Address of Current Registered Agent

**MILLER, ROBERT K ESQ.  
CUNNINGHAM, MILLER & KYLE P.A.  
2975 OVERSEAS HIGHWAY  
MARATHON, FL 33050**

**DO NOT WRITE  
IN THIS SPACE**

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$138.75  
After May 1, 2008 Fee will be \$538.75**

9. MANAGING MEMBERS/MANAGERS

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**MGRM  
KIG OPERATIONS LLC  
25000 OVERSEAS HIGHWAY  
SUMMERLAND KEY, FL 33042**

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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U000000949809  
06/03/08-80043-006 138.75

**DO NOT WRITE  
IN THIS SPACE**

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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:**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #

**4-29-08**