

# 2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000005748

FILED  
Apr 28, 2004  
Secretary of State

Entity Name: LOST KEY RESORT, LLC

## Current Principal Place of Business:

501 COMMENDENCIA STREET  
PENSACOLA, FL 32501

## New Principal Place of Business:

501 COMMENDENCIA STREET  
PENSACOLA, FL 32502

## Current Mailing Address:

501 COMMENDENCIA STREET  
PENSACOLA, FL 32501

## New Mailing Address:

501 COMMENDENCIA STREET  
PENSACOLA, FL 32502

FEI Number:

FEI Number Applied For ( )

FEI Number Not Applicable (X)

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

HIGHTOWER, DAVID E  
501 COMMENDENCIA STREET  
PENSACOLA, FL 32501

## Name and Address of New Registered Agent:

HIGHTOWER, DAVID E  
501 COMMENDENCIA STREET  
PENSACOLA, FL 32502

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:

04/28/2004

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MEMBERS:

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES:

Title: MGR ( ) Change (X) Addition  
Name: MCALISTER, ANTHONY  
Address: 4 LIBERTY STREET  
City-St-Zip: CHARLESTON, SC 29401

Title: MGRM ( ) Change (X) Addition  
Name: BARCUS, PAT  
Address: 4580 BARONY DRIVE  
City-St-Zip: SWANEE, GA 30026

Title: MGRM ( ) Change (X) Addition  
Name: WRIGHT, ROD M  
Address: 442 REGATTA BAY BOULEVARD  
City-St-Zip: DESTIN, FL 32541

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: ANTHONY MCALISTER

MGR

04/28/2004

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