

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000005096

Entity Name: 2 BLACKWATER, LLC

FILED
Mar 26, 2008
Secretary of State

Current Principal Place of Business:

106240 OVERSEAS HIGHWAY
KEY LARGO, FL 33037

New Principal Place of Business:

2 NORTH BLACKWATER LANE
KEY LARGO, FL 33037 US

Current Mailing Address:

106240 OVERSEAS HIGHWAY
KEY LARGO, FL 33037

New Mailing Address:

2 NORTH BLACKWATER LANE
KEY LARGO, FL 33037 US

FEI Number: 20-0657496

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SCHEU, CASEY
106240 OVERSEAS HIGHWAY
KEY LARGO, FL 33037 US

Name and Address of New Registered Agent:

SCHEU, CASEY C VP
2 NORTH BLACKWATER LANE
KEY LARGO, FL 33037 US

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: CASEY SCHEU

03/26/2008

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: P () Delete
Name: SCHEY, WILLIAM
Address: 2 BLACKWATER
City-St-Zip: KEY LARGO, FL 33037

Title: VP () Delete
Name: SCHEY, BARBARA
Address: 2 BLACKWATER
City-St-Zip: KEY LARGO, FL 33037

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: SCHEU, BARBARA G SEC.
Address: 2 BLACKWATER LANE
City-St-Zip: KEY LARGO, FL 33037 US

Title: MGRM (X) Change () Addition
Name: SCHEU, CASEY C VP
Address: 2 BLACKWATER LANE
City-St-Zip: KEY LARGO, FL 33037 US

I hereby certify that the information supplied with this filing does not qualify 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: BARBARA G SCHEU

MGRM

03/26/2008

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