2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 19, 2007
Secretary of State

DOCUMENT# L04000023406

Entity Name: ENGLEWOOD SAND KEY, LLC

Current Principal Place of Business:

999 SOUTH MCCALL ROAD
ENGLEWOOD, FL 34223 US

New Principal Place of Business:

Current Mailing Address:

999 SOUTH MCCALL ROAD
ENGLEWOOD, FL 34223 US

New Mailing Address:

FEI Number: 20-1177875 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

MORROW, J. KEITH
999 SOUTH MCCALL ROAD
ENGLEWOOD, FL 34223 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:	MORROW, J. KEITH	
Address:	9271 LAKE DRIVE	
City-St-Zip:	ENGLEWOOD, FL 34224 US	
Title:	MGRM	( ) Delete
Name:	MORROW, SANDRA L	
Address:	9271 LAKE DRIVE	
City-St-Zip:	ENGLEWOOD, FL 34224 US	
Title:	MGR	( ) Delete
Name:	MORROW, BRIAN K	
Address:	999 S. MCCALL RD	
City-St-Zip:	ENGLEWOOD, FL 34224	

ADDITIONS/CHANGES:

Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:	MGRM	(X) Change ( ) Addition
Name:	MORROW, BRIAN K	
Address:	999 S. MCCALL RD	
City-St-Zip:	ENGLEWOOD, FL 34224	

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: BRIAN K. MORROW MGRM 04/19/2007

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