2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

FILED May 14, 2007 8:00 am Secretary of State

05-14-2007 90361 033 ****50.00

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1. Entity Name

CITY-ST-ZIP

KEY WEST DRIVERS, LLC



Principal Place of Business

3500 NORTH ROOSEVELT BLVD. KEY WEST, FL 33040

Mailing Address

3142 NORTHSIDE DRIVE

KEY WEST, FL 33040

40112818



04272007 No Chg-LLC

CR2E083 (11/05)

4. FEI Number 20-1155132 Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional

6. Name and Address of Current Registered Agent

VAN LOON, DAVID FELDMAN KOENIG & HIGHSMITH, P.A.

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	RTHSIDE DRIVE F, FL 33040		IN THIS SPACE				
	e named entity submits this statement for the purpose of changitions of registered agent.	ging its registered	office or registered agent, or both, in the S	State of Florida. I am familiar with, a	and accept		
SIGNATURE.	Signature, typed or printed name of registered agent and title if applicable.	(NOTE: Registered A	gent signature required when reinstating)	DATE			
Fi D	iling Fee is \$50.00 ue by May 1, 2007				:		
9.	MANAGING MEMBERS/MANAGERS						
TITLE NAME STREET AODRESS CITY-ST-ZIP	MGRM WARDLOW, KENNETH D JR 3142 NORTHSIDE DR, STE 201 KEY WEST, FL 33040				;		
TITLE NAME STREET ADDRESS CITY-ST-ZIP					į		
TITLE							
NAME STREET ADDRESS CITY-ST-ZIP			DO NO	T WRITE			
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TITLE NAME STREET ADDRESS CITY-ST-ZIP					İ		
TITLE NAME							

11. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained in Chapter 119, Florida Statutes. Hurther 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: 7