

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000092152

FILED  
Feb 09, 2007  
Secretary of State

Entity Name: GOLD KEY PROPERTY MANAGEMENT LLC

## Current Principal Place of Business:

3251 SUNRISE WALK  
KISSIMMEE, FL 34747 US

## New Principal Place of Business:

## Current Mailing Address:

3251  
SUNRISE WALK  
KISSIMMEE, FL 34747 US

## New Mailing Address:

FEI Number: FEI Number Applied For ( ) FEI Number Not Applicable (X) Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

BUSINESS FILINGS INCORPORATED  
1203 GOVERNORS SQUARE BLVD  
SUITE 101  
TALLAHASSEE, FL 323012960 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: D ( ) Delete  
Name: FRAHM, LARAINÉ  
Address: 1705 NORTH GOODMAN ROAD  
City-St-Zip: KISSIMMEE, FL 34747

Title: V ( ) Delete  
Name: BROWN, VALERIE  
Address: 5033 CAPE HATTERAS DRIVE  
City-St-Zip: CLERMONT, FL 34714

Title: S ( ) Delete  
Name: BROWN, VALERIE  
Address: 5033 CAPE HATTERAS DRIVE  
City-St-Zip: CLERMONT, FL 34714

Title: D (X) Delete  
Name: BROWN, VALERIE  
Address: 5033 CAPE HATTERAS DRIVE  
City-St-Zip: CLERMONT, FL 34714

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

## ADDITIONS/CHANGES:

Title: D (X) Change ( ) Addition  
Name: BROWN, VALERIE  
Address: 5033 CAPE HATTERAS DRIVE  
City-St-Zip: CLERMONT, FL 34714

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: S ( ) Change (X) Addition  
Name: WEBSTER, DAVID  
Address: PO BOX 2310  
City-St-Zip: WINTER PARK, FL 32790 US

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: VALERIE BROWN

V

02/09/2007

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