

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000036520

FILED
Apr 07, 2009
Secretary of State

Entity Name: ISOLATION KEY, LLC

Current Principal Place of Business:

4632 NW 8TH TERRACE
OAKLAND PARK, FL 33309

New Principal Place of Business:

Current Mailing Address:

4632 NW 8TH TERRACE
OAKLAND PARK, FL 33309

New Mailing Address:

115 TURNBERRY CT.
HENDERSONVILLE, NC 28791 US

FEI Number: 51-0579008

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

VOLEC, ROBERT C JR
4632 NW 8TH TERR
FORT LAUDERDALE, FL 33309 US

Name and Address of New Registered Agent:

VOLEC, ROBERT C JR
115 TURNBERRY CT.
HENDERSONVILLE, FL 28791 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:

04/07/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: VOGEL, ROBERT C JR
Address: 4500 N. FEDERAL HWY. #368-H
City-St-Zip: LIGHTHOUSE POINT, FL 33064

Title: MGRM () Delete
Name: VOGEL, KURT
Address: 4580 NW 17TH AVE.
City-St-Zip: TAMARAC, FL 33309

Title: MGRM () Delete
Name: KNIGHT, KRAIG
Address: 1217 SE 14TH ST
City-St-Zip: CAPE CORAL, FL 33990

Title: MGRM () Delete
Name: HOLMES, JOHN
Address: 5919 UNTERMYER COURT
City-St-Zip: NORTH FORT MYERS, FL 33903

Title: MGRM () Delete
Name: LAWRENCE, SCOTT
Address: 4610 NW 15TH AVE.
City-St-Zip: FORT LAUDERDALE, FL 33309

Title: MGRM () Delete
Name: HILSON, JAMES R
Address: 1930 NE 62 COURT
City-St-Zip: FORT LAUDERDALE, FL 33308

ADDITIONS/CHANGES:

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

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

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

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: ROBERT C. VOGEL JR.

MGRM

04/07/2009

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