2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000036520

Entity Name: ISOLATION KEY, LLC

Current Principal Place of Business:	**New Principal Place of Business:**
4632 NW 8TH TERRACE OAKLAND PARK, FL 33309	

Current Mailing Address:	**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:	**Name and Address of New Registered Agent:**
VOLEC, ROBERT C JR 115 TURNBERRY CT. HENDERSONVILLE, FL 28791 US	VOGEL, 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: ROBERT C VOGEL JR   04/17/2012
                          Electronic Signature of Registered Agent   Date

MANAGING MEMBERS/MANAGERS:

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

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

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

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

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

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

I hereby 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 Statues.

SIGNATURE: ROBERT C VOGEL JR   MGRM   04/17/2012
                 Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date