

**2008 LIMITED LIABILITY COMPANY  
ANNUAL REPORT**

**FILED**  
**Apr 28, 2008 08:00 AM**  
**Secretary of State**

|   |   |
|---|---|
| <b>DOCUMENT # L05000050983</b>  |   |
| 1. Entity Name<br><b>KEY TOO, LLC</b>   |   |
| Principal Place of Business<br><b>6224 14TH STREET W.<br/>BRADENTON, FL 34207</b> | Mailing Address<br><b>6224 14TH STREET W.<br/>BRADENTON, FL 34207</b> |



04232008 No Chg-LLC

CR2E083 (12/07)

**DO NOT WRITE IN THIS SPACE**

|   |  |
|---|--|
| 4. FEI Number<br><b>20-2886139</b>  | Applied For<br><input type="checkbox"/> Not Applicable |
| 5. Certificate of Status Desired <input type="checkbox"/> <b>\$5.00 Additional Fee Required</b> |  |

**6. Name and Address of Current Registered Agent**

**STEARNS WEAVER MILLER WEISSLER ALHADEFF &  
SITTERSON, P.A. 150 WEST FLAGLER STREET  
MUSEUM TOWER, SUITE 2200  
MIAMI, FL 33130**

**DO NOT WRITE  
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable

**FILE NOW!!! FEE IS \$138.75  
After May 1, 2008 Fee will be \$538.75**

U00000925572  
05/20/08-80031-015 138.75

**9. MANAGING MEMBERS/MANAGERS**

|                |                       |
|----------------|-----------------------|
| TITLE          | MGRM                  |
| NAME           | WHITE, CECIL          |
| STREET ADDRESS | 2673 MONOCACY FORD RD |
| CITY-ST-ZIP    | FREDERICK, MD 21701   |
| TITLE          | MGRM                  |
| NAME           | WHITE, KEVIN          |
| STREET ADDRESS | 9327 HILLSBOROUGH DR  |
| CITY-ST-ZIP    | FREDERICK, MD 21701   |
| TITLE          | MGRM                  |
| NAME           | CONWAY, TIM           |
| STREET ADDRESS | 901 MEADOW GREEN DR   |
| CITY-ST-ZIP    | MOUNT AIRY, MD 21771  |
| TITLE          | MGRM                  |
| NAME           | WHITE, ANN            |
| STREET ADDRESS | 2673 MONOCACY FORD RD |
| CITY-ST-ZIP    | FREDERICK, MD 21701   |
| TITLE          |                       |
| NAME           |                       |
| STREET ADDRESS |                       |
| CITY-ST-ZIP    |                       |
| TITLE          |                       |
| NAME           |                       |
| STREET ADDRESS |                       |
| CITY-ST-ZIP    |                       |

**DO NOT WRITE  
IN THIS SPACE**

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further 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:** \_\_\_\_\_  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

**4/23/08** **941-755-5505**  
Date Daytime Phone #