

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000070112

FILED
Apr 20, 2006
Secretary of State

Entity Name: FIRST KEYS, LLC

Current Principal Place of Business:

9757 NORTH SPRINGS WAY
CORAL SPRINGS, FL 33076

New Principal Place of Business:

Current Mailing Address:

9757 NORTH SPRINGS WAY
CORAL SPRINGS, FL 33076

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:

MCCULLOUGH, STEPHEN D CLA
1301 E. OAKLAND PARK BLVD.
FT. LAUDERDALE, FL 33334 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: MGRM () Delete
Name: KLEIN-JACKSON, LILIAN
Address: 3700 GALT OCEAN DRIVE #207
City-St-Zip: CORAL SPRINGS, FL 33308

Title: MGRM () Delete
Name: KLEIN-MADES, TRACEY
Address: 13155 NW 9TH COURT
City-St-Zip: PEMBROKE PINES, FL 33028

Title: MGRM () Delete
Name: REICH, THOMAS
Address: P.O. BOX 651324
City-St-Zip: MIAMI, FL 33265

Title: MGRM () Delete
Name: KLEIN, SUSAN
Address: 63 SOUND VIEW DRIVE
City-St-Zip: PORT WASHINGTON, NY 11050

Title: MGRM () Delete
Name: KLEIN-JACKSON, LILIAN
Address: 3700 GALT OCEAN DRIVE
City-St-Zip: FT. LAUDERDALE, FL 33308

Title: MGRM () Delete
Name: KLEIN, SUSAN
Address: 63 SOUND VIEW DRIVE
City-St-Zip: PORT WASHINGTON, NY 11050

ADDITIONS/CHANGES:

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

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

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

Title: () Change () Addition
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Title: () Change () Addition
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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 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: KATHY GOODMAN

MEMB

04/20/2006

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