2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000016383

Entity Name: KEY WEST MARINE ASSISTANCE LLC

FILED Apr 25, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

321 PEACON LANE STATE WATERS VICINITY KEY WEST KEY WEST, FL 33040 US

KEY WEST, FL 33040

Current Mailing Address: New Mailing Address:

P.O. BOX 6263 1214 NEWTON STREET KEY WEST, FL 33040 KEY WEST, FL 33041 US US

FEI Number: 20-4416179 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:

D'ALBISSIN, ARNAUD G GIRARD D'ALBISSIN, ARNAUD G 321 PEACON LANE 1214 NEWTON STREET KEY WEST, FL 33040 KEY WEST, FL 33040 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: ARNAUD GIRARD D'ALBISSIN 04/25/2007

> Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

MGRM () Delete Title: (X) Change () Addition D'ALBISSIN, ARNAUD G GIRARD D'ALBISSIN, ARNAUD G Name: Name: Address: P.O. BOX 6263 Address: 1214 NEWTON STREET City-St-Zip: KEY WEST, FL 33041 US City-St-Zip: KEY WEST, FL 33040 US

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: ARNAUD GIRARD D'ALBISSIN **PRES** 04/25/2007