

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L07000014508

Entity Name: ALL KEYS GUTTER, LLC

**FILED**  
**Feb 16, 2010**  
**Secretary of State**

**Current Principal Place of Business:**

194 JASMIN ST  
TAVERNIER, FL 33070 US

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 936  
TAVERNIER, FL 33070 US

**New Mailing Address:**

FEI Number: 20-8410814

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

JORGENSEN, PAUL J JR.  
194 JASMINE STREET  
TAVERNIER, FL 33070 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  
Name: JORGENSEN, PAUL J J JR  
Address: 194 JASMINE STREET  
City-St-Zip: TAVERNIER, FL 33070 US

Title: MEMB  
Name: MONEY, LAWRENCE V MEMBER  
Address: 543 SOUND DR  
City-St-Zip: KEY LARGO, FL 33037

Title: MEMB  
Name: JOHNSON, ERIC W MEMBER  
Address: 1522 SW 157 TER  
City-St-Zip: MIAMI, FL 33187

Title: MEMB  
Name: JORGENSEN, DEANA M MEMBER  
Address: 194 JASMINE ST  
City-St-Zip: TAVERNIER, FL 33070

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 Statutes.

SIGNATURE: PAUL J JORGENSEN JR

OWNE

02/16/2010

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