2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000042513

City-St-Zip:

Entity Name: FLORIDA KEYS PARTNERSHIP, LLC

FILED Feb 11, 2009 Secretary of State

Current Principal Place of Business:				New Principal Place of Business:		
4774 N. POWERLINE ROAD DEERFIELD BEACH, FL 33073				4500 N. POWERLINE ROAD SUITE 7 DEERFIELD BEACH, FL 33073		
Current Mailing Address:				New Mailing Address:		
4774 N. POWERLINE ROAD DEERFIELD BEACH, FL 33073				4500 N. POWERLINE ROAD SUITE 7 DEERFIELD BEACH, FL 33073		
FEI Number:	26-3354795	FEI Number Applied For ()	FEI Nur	nber Not Appl	icable ()	Certificate of Status Desired ()
Name and	Address of C	urrent Registered Agent:		Name and	Address of N	New Registered Agent:
300 SEVEN	HILDEBRANDT NTY FIRST ST .CH, FL 33141	ŔEET, SUITE 302				
The above in the State		ubmits this statement for the pu	rpose o	f changing i	ts registered o	office or registered agent, or both
SIGNATUR						
	Electron	c Signature of Registered Agen	t			Date
MANAGING MEMBERS/MANAGERS:				ADDITIONS/CHANGES:		
Title: Name: Address: City-St-Zip:	MGRM () ASSENZA, ANTO 4774 N. POWEI DEERFIELD BE	RLINE ROAD		Title: Name: Address: City-St-Zip:	ASSENZA, ANT 4500 N. POWE	() Change () Addition FONIO ERLINE ROAD, #7 EACH, FL 33073
Title: Name: Address: City-St-Zip:	()	Delete		Title: Name: Address: City-St-Zip:	ASSENZA, ANT 4500 N. POWE) Change (X) Addition FONIO ERLINE ROAD, #7 EACH, FL 33073
Title: Name: Address: City-St-Zip:	()	Delete		Title: Name: Address: City-St-Zip:	MOYA, DOMIN 4500 N. POWE) Change (X) Addition IGO ERLINE ROAD, #7 EACH, FL 33073
Title: Name: Address: City-St-Zip:	()	Delete		Title: Name: Address: City-St-Zip:	SALAZAR, MAU 4500 N. POWE) Change (X) Addition JRICIO ERLINE ROAD, #7 EACH, FL 33073
Title: Name:	()	Delete		Title: Name:	MONICO, KAR) Change (X) Addition EN

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.

City-St-Zip: DEERFIELD BEACH, FL 33073

SIGNATURE: ANTONIO ASSENZA MGRM 02/11/2009