

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000093145

Entity Name: KEYS COUNTRY, LLC

FILED  
Jun 30, 2009  
Secretary of State

**Current Principal Place of Business:**

505 SOUTH TAMPANIA AVE UNIT 8  
TAMPA, FL 33609

**New Principal Place of Business:**

1910 SOUTH DALE MABRY HWY  
TAMPA, FL 33629

**Current Mailing Address:**

505 SOUTH TAMPANIA AVE UNIT 8  
TAMPA, FL 33609

**New Mailing Address:**

FEI Number: 26-3475813      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)  
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

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

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

RAYMOND, J. PAUL  
625 COURT STREET SUITE 200  
CLEARWATER, FL 33756      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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR      ( ) Delete  
Name: KEYS, KALEN  
Address: 505 SOUTH TAMPANIA AVE UNIT 8  
City-St-Zip: TAMPA, FL 33609

**ADDITIONS/CHANGES:**

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

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: KALEN KEYS

MS

06/30/2009

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