2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jul 06, 2009
Secretary of State

DOCUMENT# L08000104119

Entity Name: BALLAST KEY, LLC

Current Principal Place of Business:

% DAVID W. WOLKOWSKY
1014 FLAGLER AVE
KEY WEST, FL 33040

New Principal Place of Business:

% DAVID W. WOLKOWSKY
1014 FLAGLER AVE
KEY WEST, FL 33040 US

Current Mailing Address:

% DAVID W. WOLKOWSKY
P O BOX 1429
KEY WEST, FL 33041

New Mailing Address:

% DAVID W. WOLKOWSKY
P O BOX 660
SUMMERFIELD, FL 34492 US

FEI Number: **FEI Number Applied For ( )** **FEI Number Not Applicable (X)** **Certificate of Status Desired ( )**

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:

KORN, ROBERT E ESQ
5295 TOWN CENTER RD
STE 300
BOCA RATON, FL 33486 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: MGR ( ) Delete
Name: WOLKOWSKY, DAVID W
Address: P O BOX 1429
City-St-Zip: KEY WEST, FL 33041

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: DAVID W. WOLKOWSKY MGR 07/06/2009

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