

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 23, 2002 8:00 am
Secretary of State

01-23-2002 90052 046 ****50.00

0043828

DOCUMENT # L98000003038

1. Entity Name

KEY WEST SHUTTLE, L.L.C.

Principal Place of Business

**HILTON DOCK
 54 MERRIMAC STREET
 NEWBURYPORT MA 01950**

Mailing Address

**KEY WEST SHUTTLE LLC
 54 MERRIMAC STREET
 NEWBURYPORT MA 01950**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-3546710

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$5.00 Additional
 Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**HILTON, GEORGE D
 550 PORT-O-CALL WAY
 NAPLES FL 34102**

Name **HILTON, GEORGE D.**

Street Address (P.O. Box Number is Not Acceptable)

951 BALD EAGLE DRIVE

City **MARCO ISLAND**

FL

Zip Code **34145**

8. 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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$50.00
 Make Check Payable to Department of State
 Due By May 1, 2002**

9. MANAGING MEMBERS/MANAGERS

10. ADDITIONS/CHANGES

TITLE ☐ Delete
 NAME **MGRM**
 STREET ADDRESS **HILTON, GEORGE D**
 CITY-ST-ZIP **54 MERRIMAC STREET
 NEWBURYPORT MA 01950**

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME **MGRM**
 STREET ADDRESS **MILLER, JOSEPH**
 CITY-ST-ZIP **PO BOX 254, BARNSTABLE
 CAPE COD MA 02630**

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME **MGRM**
 STREET ADDRESS **HILL, GEORGE J JR**
 CITY-ST-ZIP **PO BOX 605
 BARNSTABLE MA 02630**

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME **MGRM**
 STREET ADDRESS **TELMAN, TIMOTHY T**
 CITY-ST-ZIP **PO BOX 153
 BARNSTABLE MA 02630**

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #

GEORGE D. HILTON

1-918-465-9885

1-8-02

CR2E083 (9/01)