

**LIMITED LIABILITY COMPANY  
UNIFORM BUSINESS REPORT (UBR)**

**FILED**  
**Apr 28, 2003 8:00 am**  
**Secretary of State**

04-28-2003 90997 020 \*\*\*\*50.00

DOCUMENT # M02000003364

1. Entity Name

KEY WORLD ENTERPRISES LLC



**DO NOT WRITE IN THIS SPACE**

2. Principal Place of Business

1324 Fletcher St. NW

Suite, Apt. #, etc.

3. Mailing Address

1324 Fletcher St NW

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State

Huntsville

City & State

Huntsville, AL

4. FEI Number

63-1270023

Applied For

Not Applicable

Zip

Country

35801-4666

USA

Zip

Country

35801-4666

USA

5. Certificate of Status Desired ☐

\$5.00 Additional  
Fee Required

7. Name and Address of Current Registered Agent

Name

Caruso + Swerbilow P.A.

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

800 East Merritt Island Cswy

City

Merritt Island

FL

Zip Code

32952

**DO NOT WRITE  
IN THIS SPACE**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

DATE

FEE IS \$50.00

Make Check Payable to Florida Department of State  
DUE BY MAY 1

9. MANAGING MEMBERS / MANAGERS

TITLE  
NAME

President + CEO MGR  
John C. Key

STREET ADDRESS  
CITY - ST - ZIP

1324 Fletcher St NW  
Huntsville, AL 35801-4666

TITLE  
NAME

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CITY - ST - ZIP

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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:

*John C. Key*

4-23-03

256-533-6993

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

Date

Daytime Phone #

CR2E083B (12/02)