## 2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

## DOCUMENT # Z00138 1. Entity Name PHOENIX OF KEY WEST, L.C. Principal Place of Business Mailing Address

FILED Apr 26, 2004 08:00 AM Secretary of State



04172004 No Chg-LLC

## DO NOT WRITE IN THIS SPACE

1609 ROCKLEDGE DRIVE

ROCKLEDGE, FL 32955

CR2E083 (10/03)

321-638-4982

Daytime Phone #

Date

4. FEI Number Applied For 52-1675596 Not Applied For Not Applied For Status Desired Fee Required Fee Required

6. Name and Address of Current Registered Agent

GREENSPOON, GERALD 100 WEST CYPRESS CREEK ROAD, SUITE 700 FT LAUDERDALE, FL 33309

617 FRONT STREET

KEY WEST, FL 33040

SIGNATURE:

## 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		(NOTE Registered Agent signature required when reinstaling)	DATE	
Filing Fee is \$50.00 Due by May 1, 2004				
9.	MANAGING MEMBERS/MANAGERS			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	M TRENARY, LARRY 1609 ROCKLEDGE DRIVE ROCKLEDGE, FL 32955			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	M TRENARY, TANIA R. 1609 ROCKLEDGE DRIVE ROCKLEDGE, FL 32955		U00000131802 04/27/04-80021-001 <u>50.00</u>	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		DO	NOT WRITE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		IN '	THIS SPACE	
TITLE NAME STREET ADDRESS CITY+ST-ZIP				
TITLE 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.				

KARRY NEWARY

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