

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000081011

Entity Name: SKADVISORS, LLC.

FILED
Feb 16, 2009
Secretary of State

Current Principal Place of Business:

350 N. WASHINGTON AVENUE
SUITE J.
TITUSVILLE, FL 32796

New Principal Place of Business:

Current Mailing Address:

350 N. WASHINGTON AVENUE
SUITE J.
TITUSVILLE, FL 32796

New Mailing Address:

FEI Number: 20-1868867

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KELVINGTON, BRUCE D
1716 OAKMONT LANE
ORLANDO, FL 32804 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: MGRM () Delete
Name: KELVINGTON, BRUCE D
Address: 1716 OAKMONT LANE
City-St-Zip: ORLANDO, FL 32804 US

Title: MGRM () Delete
Name: SHEALY, JOHN R
Address: 1724 SMITH DRIVE
City-St-Zip: TITUSVILLE, FL 32780 US

ADDITIONS/CHANGES:

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

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: J. ROGER SHEALY

MGRM

02/16/2009

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