## 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

## DOCUMENT# L07000111103

Entity Name: SKY FLORIDA LLC

FILED Feb 26, 2009 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 902 LADIES STREET FERNANDINA BEACH, FL 32034 US **Current Mailing Address: New Mailing Address:** 902 LADIES STREET US FERNANDINA BEACH, FL 32034 FEI Number: 26-1343987 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: CHISM, LORIE L ESQ BRUCE, WHITE D MRGM 1890 SOUTH 14TH STREET 902 LADIES STREET FERNANDINA BEACH, FL 32034 206 US FERNANDINA BEACH, FL 32034 US 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: BRUCE WHITE 02/26/2009 Electronic Signature of Registered Agent Date MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES: MGRM Title: () Change () Addition () Delete WHITE, BRUCE Name: Name: 902 LADIES STREET Address: Address: City-St-Zip: FERNANDINA BEACH, FL 32034 City-St-Zip: Title: Title: PART ( ) Change (X) Addition ( ) Delete Name: Name: SANFORD, JULIA S Address: Address: 902 LADIES STREET City-St-Zip: City-St-Zip: FERNANDINA BEACH, FL 32034 Title: () Delete Title: PART ( ) Change (X) Addition TAHCHIEVA, GALINA Name: Name: Address: Address: 614 ALEDO AVE City-St-Zip: City-St-Zip: CORAL GABLES, FL 33134 Title: () Delete Title: PART ( ) Change (X) Addition Name: Name: WITCOSKI, SCOTT 237 CAMP CREEK ROAD SOUTH Address: Address: City-St-Zip: City-St-Zip: PANAMA CITY BEACH, FL 32413 Title: () Delete Title: PART ( ) Change (X) Addition BREWER, DAVID Name: Name: PO BOX 611611 Address: Address: ROSEMARY BEACH, FL 32461 City-St-Zip: City-St-Zip: Title: () Delete Title: ( ) Change (X) Addition BREWER, JOSEPHINE Name: Name: Address: Address: PO BOX 611611 ROSEMARY BEACH, FL 32461 City-St-Zip: 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: BRUCE D WHITE MGRM 02/26/2009