

# 2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000016855

Entity Name: GALT SKYE, L.L.C.

FILED  
Jan 25, 2005  
Secretary of State

**Current Principal Place of Business:**

585 NE 58TH STREET  
MIAMI, FL 33137

**New Principal Place of Business:**

5600 N BAYSHORE DR  
MIAMI, FL 33137

**Current Mailing Address:**

585 NE 58TH STREET  
MIAMI, FL 33137

**New Mailing Address:**

5600 N BAYSHORE DR  
MIAMI, FL 33137

FEI Number: 20-0062048

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

SHERMAN, THOMAS G  
218 ALMERIA AVENUE  
CORAL GABLES, FL 33134 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/MEMBERS:**

Title: MGRM ( ) Delete  
Name: MIKESELL, KATHRYN Q  
Address: 585 NE 58TH STREET  
City-St-Zip: MIAMI, FL 33137

**ADDITIONS/CHANGES:**

Title: MGRM (X) Change ( ) Addition  
Name: MIKESELL, KATHRYN Q  
Address: 5600 N BAYSHORE DR  
City-St-Zip: MIAMI, FL 33137

I hereby certify that the information supplied with this filing does not qualify for the 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 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: KATHRYN MIKESELL

MGR

01/25/2005

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