

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L00000010175

Entity Name: SKYLANE PARTNERS, LLC

FILED
Feb 04, 2005
Secretary of State

Current Principal Place of Business:

11521 INNFIELDS DR
ODESSA, FL 33556

New Principal Place of Business:

6018 LEMON TREE CT
TAMPA, FL 33625

Current Mailing Address:

11521 INNFIELDS DR
ODESSA, FL 33556

New Mailing Address:

6018 LEMON TREE CT
TAMPA, FL 33625

FEI Number: 59-3651013

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

JORGENSEN, MARK
11521 INNFIELDS DR
ODESSA, FL 33556 US

Name and Address of New Registered Agent:

STORM, THEODORE W
6018 LEMON TREE CT
TAMPA, FL 33625 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: THEODORE W. STORM

02/04/2005

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MEMBERS:

Title: MGRM () Delete
Name: STORM, THEODORE W
Address: 6018 LEMON TREE COURT
City-St-Zip: TAMPA, FL 33624

Title: MGRM (X) Delete
Name: JORGENSEN, MARK W
Address: 11521 INNFIELDS DRIVE
City-St-Zip: ODESSA, FL 33556

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 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: THEODORE W STORM

MMM

02/04/2005

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