

**2005 LIMITED LIABILITY COMPANY  
ANNUAL REPORT**

**FILED**  
**Mar 19, 2005 08:00 AM**  
**Secretary of State**

DOCUMENT # L03000014040

1. Entity Name  
SK & DV, LLC



Principal Place of Business  
124 BEAR'S CLUB DRIVE  
JUPITER, FL 33477

Mailing Address  
124 BEAR'S CLUB DRIVE  
JUPITER, FL 33477

**DO NOT WRITE IN THIS SPACE**



02222005 No Chg-LLC

CR2E083 (10/03)

4. FEI Number  
02-0687150

Applied For  
Not Applicable

5. Certificate of Status Desired ☐

**\$5.00** Additional  
Fee Required

**6. Name and Address of Current Registered Agent**

HAMBY, LOUIS L III ESQ  
% ALLEY, MAAS, ROGERS & LINDSAY  
321 ROYAL POINCIANA PLAZA SOUTH  
PALM BEACH, FL 33480

**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 \_\_\_\_\_

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE \_\_\_\_\_

**Filing Fee is \$50.00  
Due by May 1, 2005**

000000270237  
03/19/05-80043-009 50.00

**9. MANAGING MEMBERS/MANAGERS**

TITLE P  
NAME NICKLAUS, KRISTA  
STREET ADDRESS 11780 U.S. HWY ONE., SUITE 500  
CITY-ST-ZIP NORTH PALM BEACH, FL 33408

TITLE V  
NAME NICKLAUS, STEVE  
STREET ADDRESS 11780 U.S. HWY ONE., SUITE 500  
CITY-ST-ZIP NORTH PALM BEACH, FL 33408

TITLE T  
NAME LEFFERDINK, DEV BALA  
STREET ADDRESS 124 BEARS CLUB DR  
CITY-ST-ZIP JUPITER, FL 33477

TITLE S  
NAME VAN LEFFERDINK, MORGAN  
STREET ADDRESS 124 BEARS CLUB DR  
CITY-ST-ZIP JUPITER, FL 33477

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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IN THIS SPACE**

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.

SIGNATURE: \_\_\_\_\_

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

Date

Daytime Phone #

3/17/05 561/227-0320