


**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 <input type="checkbox"/>	\$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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

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

000000270237
03/19/05-80043-009 50.00

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P NICKLAUS, KRISTA 11780 U.S. HWY ONE., SUITE 500 NORTH PALM BEACH, FL 33408
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V NICKLAUS, STEVE 11780 U.S. HWY ONE., SUITE 500 NORTH PALM BEACH, FL 33408
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T LEFFERDINK, DEV BALA 124 BEARS CLUB DR JUPITER, FL 33477
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S VAN LEFFERDINK, MORGAN 124 BEARS CLUB DR JUPITER, FL 33477
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

**DO NOT WRITE
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: M. Lefferdink Date: 3/17/05 Daytime Phone #: 561/227-0320
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE