


# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

**FILED**  
**Apr 03, 2008 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # L03000030017</b>	
1. Entity Name SKO REAL ESTATE II, LLC	

Principal Place of Business 1110 NORTH 9TH AVENUE PENSACOLA, FL 32501	Mailing Address 1110 NORTH 9TH AVENUE PENSACOLA, FL 32501
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**DO NOT WRITE IN THIS SPACE**



01102008No Chg-LLC CR2E083 (12/07)

4. FEI Number NOT APPLICABLE	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  O'CONNOR, SUSAN 1110 NORTH 9TH AVENUE PENSACOLA, FL 32501
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**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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

**FILE NOW!!! FEE IS \$138.75**  
**After May 1, 2008 Fee will be \$538.75**

U000000878090  
04/15/08-80006-015 138.75

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM O'CONNOR, JOHN L 1110 NORTH 9TH AVENUE PENSACOLA, FL 32501
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM O'CONNOR, SUSAN 1110 NORTH 9TH AVENUE PENSACOLA, FL 32501
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11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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:** *Susan O'Connor* **4-1-08** **8504709555**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #