## 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

#### DOCUMENT # L04000005313

1. Entity Name
SKORMAN ENTERPRISES, LLC

FILED Apr 10, 2007 08:00 A Secretary of State

Principal Place of Business

6000 METROWEST BLVD SUITE 111

ORLANDO, FL 32835 US

Mailing Address

6000 METROWEST BLVD

SUITE 111

ORLANDO, FL 32835 US



### DO NOT WRITE IN THIS SPACE

01042007 No Chg-LLC

CR2E083 (11/05)

4. FEI Number 59-3784136

Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

SKORMAN, MARC 6000 METROWEST BLVD, SUITE 111 ORLANDO, FL 32835

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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, 2007

9.	MANAGING MEMBERS/MANAGERS
TITLE NAME STREET ADDRESS	MGRM SKORMAN, MARC 6000 METROWEST BLVD, SUITE 111
CITY-ST-ZIP	ORLANDO, FL 32835
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM SKORMAN, KEVIN 6000 METROWEST BLVD, SUITE 111 ORLANDO, FL 32835
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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.

MARC SKORMAN, MANAGO

SIGNATURE:

MAN &GETED OF PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

4/5/07

407 253-200

Daytime Phone #