2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 20, 2007
Secretary of State

DOCUMENT# L04000030514

Entity Name: SK DEVELOPMENT 3 LC

Current Principal Place of Business:

4900-H CREEKSIDE DRIVE
CLEARWATER, FL 33760

New Principal Place of Business:

Current Mailing Address:

4900-H CREEKSIDE DRIVE
CLEARWATER, FL 33760

New Mailing Address:

FEI Number: 56-2505493 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

QUARTETTI, THOMAS L
4900-H CREEKSIDE DRIVE
CLEARWATER, FL 33760 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent — Date

MANAGING MEMBERS/MANAGERS:

Title:	P	( ) Delete
Name:	QUARTETTI, RALPH W	
Address:	4900 CREEKSIDE DR STE H	
City-St-Zip:	CLEARWATER, FL 33760	
Title:	VP	( ) Delete
Name:	QUARTETTI, THOMAS L	
Address:	4900 CREEKSIDE DR STE H	
City-St-Zip:	CLEARWATER, FL 33760	
Title:	ST	( ) Delete
Name:	HUNTER, ERIKA D	
Address:	4900 CREEKSIDE DR STE H	
City-St-Zip:	CLEARWATER, FL 33760	

ADDITIONS/CHANGES:

Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
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 Chapter 119, 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: ERIKA D. HUNTER S/T 04/20/2007

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