

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000056545

Entity Name: SKILTREK LLC

FILED  
Jan 14, 2009  
Secretary of State

**Current Principal Place of Business:**

1901 1ST ST NTH, APT 1405  
JACKSONVILLE, FL 32250

**New Principal Place of Business:**

8431 THORNBUSH CT  
JACKSONVILLE, FL 32216

**Current Mailing Address:**

PO BOX 49067  
JACKSONVILLE BEACH, FL 32240

**New Mailing Address:**

FEI Number: 20-1461934      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

**Name and Address of Current Registered Agent:**

DAVIES, IAN G  
1901 1ST ST NTH, APT 1405  
JACKSONVILLE, FL 32250      US

**Name and Address of New Registered Agent:**

DAVIES, IAN G  
8431 THORNBUSH CT  
JACKSONVILLE, FL 32216      US

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: \_\_\_\_\_

01/14/2009

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM      ( ) Delete  
Name: DAVIES, IAN G  
Address: 1901 1ST ST NTH, APT 1405  
City-St-Zip: JACKSONVILLE, FL 32250

**ADDITIONS/CHANGES:**

Title: MGRM      (X) Change      ( ) Addition  
Name: DAVIES, IAN G  
Address: 8431 THORNBUSH ST  
City-St-Zip: JACKSONVILLE, FL 32216

I hereby certify that the information supplied with this filing does not qualify 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: IAN DAVIES

MGRM

01/14/2009

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