

**2008 LIMITED LIABILITY COMPANY ANNUAL REPORT**

**FILED  
Mar 20, 2008  
Secretary of State**

DOCUMENT# L05000013663

Entity Name: SKY DANCERS, LLC

**Current Principal Place of Business:**

2912 W. KNIGHTS AVE.  
TAMPA, FL 33611 US

**New Principal Place of Business:**

**Current Mailing Address:**

2912 W. KNIGHTS AVE.  
TAMPA, FL 33611 US

**New Mailing Address:**

FEI Number: 20-3869717      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

SIMPSON, LARRY L  
2912 W. KNIGHTS AVE.  
TAMPA, FL 33611 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: MGRM ( ) Delete  
Name: SIMPSON, LARRY L  
Address: 2912 W. KNIGHTS AVE.  
City-St-Zip: TAMPA, FL 33611 US

Title: MGRM ( ) Delete  
Name: BISHOP, GENE R  
Address: 2912 W. KNIGHTS AVE.  
City-St-Zip: TAMPA, FL 33611 US

**ADDITIONS/CHANGES:**

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 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: LARRY L. SIMPSON

MGRM

03/20/2008

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