

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000043819

Entity Name: SKC-1 PROPERTIES, LLC

FILED  
Apr 17, 2008  
Secretary of State

## Current Principal Place of Business:

2155 BROADPOINT DR.  
HARBOUR HEIGHTS, FL 33983

## New Principal Place of Business:

5644 BLACKJACK COURT  
PUNTA GORDA, FL 33982

## Current Mailing Address:

PO BOX 511227  
PUNTA GORDA, FL 33951

## New Mailing Address:

FEI Number: 20-2782747

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

CORBETT, SHAUN D  
2155 BROADPOINT DR.  
HARBOUR HEIGHTS, FL 33983 US

## Name and Address of New Registered Agent:

CORBETT, SHAUN D  
5644 BLACKJACK COURT  
PUNTA GORDA, FL 33982 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:

04/17/2008

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MANAGERS:

Title: MGMR ( ) Delete  
Name: CORBETT, SHAUN D  
Address: 2155 BROADPOINT DR  
City-St-Zip: PUNTA GORDA, FL 33983

Title: MGMR (X) Delete  
Name: CORBETT, KIMBERLY A  
Address: 2155 BROADPOINT DR  
City-St-Zip: PUNTA GORDA, FL 33983

## ADDITIONS/CHANGES:

Title: MGMR (X) Change ( ) Addition  
Name: CORBETT, SHAUN D  
Address: 5644 BLACKJACK COURT  
City-St-Zip: PUNTA GORDA, FL 33982

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: SHAUN D CORBETT

MGMR

04/17/2008

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