

2006 LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT

DOCUMENT# L05000110566

FILED
Mar 17, 2006
Secretary of State**Entity Name:** SKYLINES LLC**Current Principal Place of Business:**9600 W. SAMPLE ROAD
SUITE 402
CORAL SPRINGS, FL 33065 US**New Principal Place of Business:****Current Mailing Address:**9600 W. SAMPLE ROAD
SUITE 402
CORAL SPRINGS, FL 33065 US**New Mailing Address:****FEI Number:** 20-4094383**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**GASPARE, VALENTINO
6372 HARBOR BEND
MARGATE, FL 33063 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: DAVID, LAM
Address: 7064 NW 66 TERRACE
City-St-Zip: PARKLAND, FL 33067 USTitle: MGRM () Delete
Name: GASPARE, VALENTINO
Address: 6372 HARBOR BEND
City-St-Zip: MARGATE, FL 33063 USTitle: MGR (X) Delete
Name: LICHTMAN, CATHERINE A
Address: 7525 NW 61ST TERRACE #2801
City-St-Zip: PARKLAND, FL 33067 US**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: GASPARE VALENTINO

MGRM

03/17/2006

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