

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000122258

FILED
Apr 27, 2007
Secretary of State

Entity Name: SKYLINE ENTERTAINMENT DEVELOPMENT, LLC

Current Principal Place of Business:

4106 LOUISBURG LANE
ORLANDO, FL 32808 OS

New Principal Place of Business:

4106 LOUISBURG LANE
ORLANDO, FL 32808 OR

Current Mailing Address:

4106 LOUISBURG LANE
ORLANDO, FL 32808 OS

New Mailing Address:

PO BOX 180642
CASSEBERRY, FL 32707 OR

FEI Number: 20-3997303

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MCFARLANE, ZANE A
4916 VIRGIN GORDA WAY
SUITE # 1226
ORLANDO, FL 32839 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: MCFARLANE, ZANE A
Address: 4916 VIRGIN GORDA WAY, SUITE # 1226
City-St-Zip: ORLANDO, FL 32839 OR

Title: MGRM () Delete
Name: FOSTER, KENNARD
Address: 554 DOVE COURT
City-St-Zip: KISSIMMEE, FL 34759 OS

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: MGRM (X) Change () Addition
Name: FOSTER, KENNARD
Address: 107 MORELIA LANE
City-St-Zip: KISSIMMEE, FL 34743 OS

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: ZANE A. MCFARLANE

CEO

04/27/2007

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