2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Feb 13, 2008
Secretary of State

DOCUMENT# L06000033292

Entity Name: SKS INVESTMENT PROPERTIES, LLC

Current Principal Place of Business:

SASH S. SESHIAPRI
357 SEVERIN RD
PORT CHARLOTTE, FL 33952

New Principal Place of Business:

SASH S. SESHADRI
357 SEVERIN RD
PORT CHARLOTTE, FL 33952

Current Mailing Address:

SASH S. SESHIAPRI
357 SEVERIN RD
PORT CHARLOTTE, FL 33952

New Mailing Address:

SASH S. SESHADRI
357 SEVERIN RD
PORT CHARLOTTE, FL 33952

FEI Number: 20-4763262 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SESHIAPRI, SASH S
357 SEVERIN RD
PORT CHARLOTTE, FL 33952 US

Name and Address of New Registered Agent:

SESHADRI, SASH S
357 SEVERIN RD
PORT CHARLOTTE, FL 33952 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: SASH S SESHADRI 02/13/2008
Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM ( ) Delete
Name: SESHADRI, SASH S
Address: 357 SEVERIN RD
City-St-Zip: PORT CHARLOTTE, FL 33952

Title: MGRM ( ) Delete
Name: SESHADRI, SASH S
Address: 357 SEVERIN RD
City-St-Zip: PORT CHARLOTTE, FL 33952

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: SASH S SESHADRI MGRM 02/13/2008
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date