

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000035246

Entity Name: SKYVIEW DEVELOPMENT, LLC

FILED  
Feb 18, 2009  
Secretary of State

## Current Principal Place of Business:

2104 THOMAS DRIVE  
PANAMA CITY BEACH, FL 32408

## New Principal Place of Business:

## Current Mailing Address:

P.O. BOX 27279  
PANAMA CITY BEACH, FL 32411

## New Mailing Address:

FEI Number: 20-4644822

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

COUNTS, STEVE G  
2104 THOMAS DRIVE  
PANAMA CITY BEACH, FL 32408 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: COUNTS, STEVE G  
Address: PO BOX 27279  
City-St-Zip: PANAMA CITY BEACH, FL 32411

Title: MGRM ( ) Delete  
Name: HILL, DAVID W  
Address: 512-B COMMERCE PARK  
City-St-Zip: PANAMA CITY BEACH, FL 32408

Title: MGRM ( ) Delete  
Name: MATTHEWS, SAM  
Address: PO BOX 2117  
City-St-Zip: PANAMA CITY, FL 32402

## 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 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: STEVE COUNTS

MGRM

02/18/2009

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