

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000087289

FILED
Apr 29, 2008
Secretary of State

Entity Name: SKYLINE CC VENTURE, L.L.C.

Current Principal Place of Business:

12800 UNIVERSITY DRIVE
SUITE 275
FT. MYERS, FL 33907

New Principal Place of Business:

12800 UNIVERSITY DRIVE
SUITE 275
FT. MYERS, FL 33907 US

Current Mailing Address:

12800 UNIVERSITY DRIVE
SUITE 275
FT. MYERS, FL 33907

New Mailing Address:

12800 UNIVERSITY DRIVE
SUITE 275
FT. MYERS, FL 33907 US

FEI Number: 20-5511101

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PREISS, MICHELLE A
12800 UNIVERSITY DRIVE
SUITE 275
FT. MYERS, FL 33907 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: MGR () Delete
Name: BUIGAS, OJ
Address: 12800 UNIVERSITY DRIVE SUITE 275
City-St-Zip: FORT MYERS, FL 33907

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

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

Title: P () Change (X) Addition
Name: BAUM, HOWARD P
Address: 12800 UNIVERSITY DRIVE SUITE 275
City-St-Zip: FORT MYERS, FL 33907 US

Title: EVP () Change (X) Addition
Name: MORRIS, GREGORY M EVP
Address: 12800 UNIVERSITY DRIVE SUITE 275
City-St-Zip: FORT MYERS, FL 33907 US

Title: CFO () Change (X) Addition
Name: DOUGLAS, CAROL A CFO
Address: 12800 UNIVERSITY DRIVE SUITE 275
City-St-Zip: FORT MYERS, FL 33907 US

Title: VP () Change (X) Addition
Name: PREISS, MICHELLE A VP
Address: 12800 UNIVERSITY DRIVE SUITE 275
City-St-Zip: FORT MYERS, FL 33907 US

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: MICHELLE A PREISS

VP

04/29/2008

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