

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L07000104832

**FILED**  
**Apr 09, 2012**  
**Secretary of State**

**Entity Name:** SKYPOINT I, LLC

**Current Principal Place of Business:**

3509 EHRLICH ROAD  
TAMPA, FL 33618

**New Principal Place of Business:**

**Current Mailing Address:**

3509 EHRLICH ROAD  
TAMPA, FL 33618

**New Mailing Address:**

**FEI Number:** 26-2417842

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

COLLADO, DONALD  
CO/COLLADO & COMPANY  
14479 BRUCE B DOWNS BLVD  
TAMPA, FL 33613 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:** PRES  
**Name:** PENARANDA, ROBERTO A  
**Address:** 3509 EHRLICH ROAD  
**City-St-Zip:** TAMPA, FL 33618

**Title:** VP  
**Name:** PENARANDA, MARLENE Z  
**Address:** 3509 EHRLICH ROAD  
**City-St-Zip:** TAMPA, FL 33618

I hereby 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:** ROBERTO PENARANDA

PRES

04/09/2012

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