

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000117613

FILED  
Mar 15, 2009  
Secretary of State

Entity Name: SKIM SHIELD, LLC

**Current Principal Place of Business:**

2230 WEST BAY DRIVE  
SUITE D  
LARGO, FL 33770 US

**New Principal Place of Business:**

**Current Mailing Address:**

2230 WEST BAY DRIVE  
SUITE D  
LARGO, FL 33770 US

**New Mailing Address:**

FEI Number: 26-1454127      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

BRYAN J. STANLEY, P.A.  
114 TURNER STREET  
CLEARWATER, FL 33756 US

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

H. STANLEY, SOFER  
2230 WEST BAY DRIVE  
SUITE D  
LARGO, FL 33770 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: H. STANLEY SOFER

03/15/2009

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR ( ) Delete  
Name: XXI MANAGEMENT, L.L., C.  
Address: 2230 WEST BAY DRIVE  
City-St-Zip: LARGO, FL 33770 US

**ADDITIONS/CHANGES:**

Title: MGRM (X) Change ( ) Addition  
Name: SOFER, H. STANLEY  
Address: 2230 WEST BAY DRIVE  
City-St-Zip: LARGO, FL 33770 US

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

Title: MGM ( ) Change (X) Addition  
Name: SOFER, SUZY  
Address: 2230 W. BAY DRIVE  
City-St-Zip: LARGO, FL 33770

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: H. STANLEY SOFER

MGRM

03/15/2009

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