

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L08000049031

Entity Name: SKY GAMES, LLC

**FILED**  
**Feb 18, 2010**  
**Secretary of State**

**Current Principal Place of Business:**

5702 S ATLANTIC AVE  
NEW SMYRNA BEACH, FL 32169 US

**New Principal Place of Business:**

**Current Mailing Address:**

5702 S. ATLANTIC AVE.  
NEW SMYRNA BEACH, FL 32169 US

**New Mailing Address:**

5702 S ATLANTIC AVE  
NEW SMYRNA BEACH, FL 32169 US

FEI Number: 37-1567775

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

YURCHISON, GEORGE S  
5702 S ATLANTIC AVE  
NEW SMYRNA BEACH, FL 32169 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  
Name: YURCHISON, GEORGE S  
Address: 5702 S ATLANTIC AVE  
City-St-Zip: NEW SMYRNA BEACH, FL 32169 US

Title: MGRM  
Name: YURCHISON, KIMBERLY A  
Address: 5702 S ATLANTIC AVE  
City-St-Zip: NEW SMYRNA BEACH, FL 32169 US

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: GEORGE SCOTT YURCHISON

MR.

02/18/2010

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