

# 2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L99000000611

FILED  
Apr 20, 2005  
Secretary of State

**Entity Name:** SKOPE SPLICING & COMMUNICATION, L.L.C.

**Current Principal Place of Business:**

5205 PORPOISE PLACE  
NEW PORT RICHEY, FL 34652

**New Principal Place of Business:**

**Current Mailing Address:**

5509 GRAND BLVD., SUTIE 300  
NEW PORT RICHEY, FL 34652

**New Mailing Address:**

**FEI Number:** 22-3423563

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

BUTTREY, KELLY  
5205 PORPOISE PLACE  
NEW PORT RICHEY, FL 34652 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/MEMBERS:**

Title: MGRM ( ) Delete  
Name: BUTTREY, KELLY  
Address: 5205 PORPOISE PLACE  
City-St-Zip: NEW PORT RICHEY, FL 34652

Title: MGRM ( ) Delete  
Name: BUTTREY, PAUL  
Address: 5205 PORPOISE PLACE  
City-St-Zip: NEW PORT RICHEY, FL 34652

**ADDITIONS/CHANGES:**

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 for the exemption stated in Section 119.07(3)(i), 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:** KELLY BUTTREY

MGRM

04/20/2005

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