

# **2008 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M07000003628

Entity Name: ESKRIDGE CAPITAL, LLC

**FILED**  
**Apr 22, 2008**  
**Secretary of State**

**Current Principal Place of Business:**

2210 89TH AVENUE N.E.  
CLYDE HILL, WA 980042458

**New Principal Place of Business:**

**Current Mailing Address:**

2210 89TH AVENUE N.E.  
CLYDE HILL, WA 980042458

**New Mailing Address:**

FEI Number: 60-2601866

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

STRALEY & OTTO, P.A.  
2699 STIRLING ROAD, STE C-207  
FORT LAUDERDALE, FL 33312 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 ( ) Delete  
Name: ESKRIDGE, JOE  
Address: 2210 89TH AVENUE N.E.  
City-St-Zip: CLYDE HILL, WA 980042458

**ADDITIONS/CHANGES:**

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

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: JOE ESKRIDGE

MGRM

04/22/2008

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