

**2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L14000153057

**Entity Name:** SKELOS PRODUCTIONS, LLC

**Current Principal Place of Business:**

1425 SILVER PINE LANE  
TALLAHASSEE, FL 32312

**Current Mailing Address:**

PO BOX 20781  
TALLAHASSEE, FL 32316 US

**FEI Number:** NOT APPLICABLE

**Certificate of Status Desired:** Yes

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

SHANKS, JEFFREY  
1425 SILVER PINE LANE  
TALLAHASSEE, FL 32312 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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Authorized Person(s) Detail :**

Title AMBR  
Name FARR-NASH, MARK  
Address 1715 CUMBERLAND ST  
City-State-Zip: VERNON TX 76384

Title AMBR  
Name SHANKS, JEFFREY  
Address PO BOX 20781  
City-State-Zip: TALLAHASSEE FL 32316

Title AUTHORIZED MEMBER  
Name GRUBER, CHRISTOPHER  
Address 1 AVILA ROAD  
City-State-Zip: SANTA FE NM 87508

*I hereby certify that the information indicated on this report or supplemental 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 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** JEFFREY SHANKS

**REGISTERED AGENT**

**04/27/2016**

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date