2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# M54841

Entity Name: SK LAND COMPANY

FILED Apr 30, 2008 Secretary of State

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Current Principal Place of Business: New Principal Place of Business:

506 FLEMING ST
KEY WEST, FL 33040 US
506 FLEMING STREET
KEY WEST, FL 33040 US

Current Mailing Address: New Mailing Address:

506 FLEMING ST 506 FLEMING STREET C/O LUZ ARMENDARIZ

KEY WEST, FL 33040 US KEY WEST, FL 33040 US

FEI Number: 59-2828936 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

SPOTTSWOOD, WILLIAM B.
500 FLEMING STREET
KEY WEST, FL 33040 US
SPOTTSWOOD, WILLIAM B
506 FLEMING STREET
KEY WEST, FL 33040 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: WILLIAM B. SPOTTSWOOD 04/30/2008

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete Title: DPS (X) Change () Addition Name: SPOTTSWOOD, JOHN M., Name: SPOTTSWOOD, JOHN M JR Address: 500 FLEMING STREET Address: 506 FLEMING STREET

City-St-Zip: KEY WEST, FL City-St-Zip: KEY WEST, FL

VD () Delete Title: (X) Change () Addition Title: Name: SPOTTSWOOD, WILLIAM, B. Name: SPOTTSWOOD, WILLIAM B 500 FLEMING STREET 506 FLEMING STREET Address: Address: KEY WEST, FL 33040 KEY WEST, FL 33040 City-St-Zip: City-St-Zip:

Title: VTD () Delete Title: DV (X) Change () Addition Name: SPOTTSWOOD, ROBERT A. Name: SPOTTSWOOD, ROBERT A

Address: 506 FLEMING ST Address: 506 FLEMING ST

City-St-Zip: KEY WEST, FL 33040 City-St-Zip: KEY WEST, FL 33040

Title: VSD () Delete Title: DV (X) Change () Addition
Name: KNIGHT, EDWARD B.

Address: 236 DI MAL STREET

 Address:
 336 DUVAL ST.
 Address:
 336 DUVAL STREET

 City-St-Zip:
 KEY WEST, FL 33040
 City-St-Zip:
 KEY WEST, FL 33040

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 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 an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ROBERT A. SPOTTSWOOD DV 04/30/2008