

2008 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2008

DOCUMENT # A24216

1. Entity Name
S. K. PARTNERS I, LIMITED



SECRETARY OF STATE
DIVISION OF CORPORATIONS

08 JUN 27 AM 10:30

Principal Place of Business
**900 S. FEDERAL HIGHWAY
SUITE 321
STUART, FL 34994**

Mailing Address
**900 S. FEDERAL HIGHWAY
SUITE 321
STUART, FL 34994**



01082008 No Chg-LP

CR2E003 (12/06)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-2850111

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

**STETSON, J. MICHAEL
900 S. FEDERAL HIGHWAY
SUITE 321
STUART, FL 34994**

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of, registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

4-30-08

**-FILE NOW!!! FEE IS \$500.00
After May 1, 2008, Fee will be \$900.00**

400132027714
07/01/08--01006--008 **500.00

A GENERAL PARTNER THAT IS A BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.
NOTE: General Partners MAY NOT be changed on the form; an amendment must be filed to change a general partner.

12. GENERAL PARTNER INFORMATION

DOCUMENT # **P99000079011**
NAME **SKI GP, INC.**
STREET ADDRESS **4400 PGA BLVD, STE 900 ADMIRALTY CENTER**
CITY-ST-ZIP **PALM BEACH GARDENS, FL 33410**

DOCUMENT #
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STREET ADDRESS
CITY-ST-ZIP

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**DO NOT WRITE
IN THIS SPACE**

[Handwritten signature]

14. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a General Partner of the limited partnership or the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Date

Daytime Phone #

4/30/08 8033500

STAPLE CHECK HERE