

2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F09000000340

Entity Name: SKY LIMITS 1 INC

FILED
Jan 12, 2010
Secretary of State

Current Principal Place of Business:

2065 HWY A1A SUITE 1402
SATELLITE BEACH, FL 32937

New Principal Place of Business:

950 N.COCOA BLVD
102
COCOA, FL 32922

Current Mailing Address:

PO BOX 372029
SATELLITE BEACH, FL 32937

New Mailing Address:

FEI Number: 20-4977498 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

TRICE, ANTWON
2065 HWY A1A SUITE 1402
SATELLITE BEACH, FL 32937 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P
Name: TRICE, ANTWON
Address: PO BOX 372029
City-St-Zip: SATELLITE BEACH, FL 32937

Title: VP
Name: SCAVILLA, MARISA
Address: PO BOX 372029
City-St-Zip: SATELLITE BEACH, FL 32937

Title: S
Name: BYRD, ROBERT
Address: PO BOX 372029
City-St-Zip: SATELLITE BEACH, FL 32937

Title: T
Name: DYER, KEVIN
Address: PO BOX 372029
City-St-Zip: SATELLITE BEACH, FL 32937

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 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 all other like empowered.

SIGNATURE: ANTWON TRICE

PRES

01/12/2010

Electronic Signature of Signing Officer or Director

Date