2008 LIMITED LIABILITY COMPANY
ANNUAL REPORT

DOCUMENT # L04000026971

1. Entity Name
S.S.K., L.L.C.

Principal Place of Business	Mailing Address
3120 O'BRIEN DRIVE TALLAHASSEE, FL 32309	3120 O'BRIEN DRIVE TALLAHASSEE, FL 32309

DO NOT WRITE IN THIS SPACE

01172008 No Chg-LLC   CR2E083 (12/07)

4. FEI Number	Applied For
54-2163667	Not Applicable

5. Certificate of Status Desired   ☐   **$5.00** Additional Fee Required

6. Name and Address of Current Registered Agent

DAWS, SONYA K
2618 CENTENNIAL PLACE
TALLAHASSEE, FL 32308

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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 d applicable.   (NOTE: Registered Agent signature required when reinstating)   DATE

FILE NOW!!! FEE IS $138.75
After May 1, 2008 Fee will be $538.75

9. MANAGING MEMBERS/MANAGERS

TITLE	MGR
NAME	DAWS, STEPHEN C
STREET ADDRESS	P.O. BOX 13677
CITY-ST-ZIP	TALLAHASSEE, FL 32309
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
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02/12/08-80073-003 138.75

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11. 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 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: _____ STEPHEN C. DAWS 1/31/08 850 5454748

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE   Date   Daytime Phone #