

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000092342

FILED
Jul 21, 2008
Secretary of State

Entity Name: SK ROYAL INVESTMENTS, LLC

Current Principal Place of Business:

3304 JOPPA DRIVE
PACE, FL 32571

New Principal Place of Business:

Current Mailing Address:

3304 JOPPA DRIVE
PACE, FL 32571

New Mailing Address:

FEI Number: 20-3928303 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

KENNEDY, RONALD A
3304 JOPPA DRIVE
PACE, FL 32571 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

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: SCOTT, JEFFREY A
Address: 4914 LAUREL OAK DRIVE
City-St-Zip: PACE, FL 32571

Title: MGRM () Delete
Name: SCOTT, JERRY A SR.
Address: 4765 WATERMILL RD.
City-St-Zip: JAY, FL 32565

Title: MGR () Delete
Name: KENNEDY, RONALD A
Address: 3304 JOPPA DRIVE
City-St-Zip: PACE, FL 32571

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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 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 608, Florida Statutes.

SIGNATURE: RONALD A. KENNEDY

MGR

07/21/2008

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date