2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000005839

Title:

Name:

Address:

City-St-Zip:

EST

() Delete

COULTAS, KAREN L

3690 AVOCADO DRIVE

LARGO, FL 33770 US

Entity Name: SKAL INTERNATIONAL TAMPA BAY, INC.

FILED Mar 27, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 3690 AVOCADO DRIVE LARGO, FL 33770 **Current Mailing Address: New Mailing Address:** 3690 AVOCADO DRIVE LARGO, FL 33770 FEI Number: 23-7386605 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: COULTAS, KAREN L 3690 AVOĆADO DRIVE LARGO, FL 33770 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 **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: (X) Change () Addition () Delete WESTMAN, JACK A BLUM, ROBERTA Name: Name: 10443 MAJESTIC DRIVE Address: 1570 MACCHESNEY DR Address: City-St-Zip: LARGO, FL 33774 US City-St-Zip: TARPON SPRINGS, FL 34689 US Title: () Delete Title: (X) Change () Addition HAMILTON-BLUM, ROBERTA S Name: ELBE, GEORGE Name: Address: 419 N RING AVE Address: 12912 HICKORYWOOD LANE City-St-Zip: TARPON SPRINGS, FL 34689 US City-St-Zip: LARGO, FL 33774 US Title: () Delete Title: (X) Change () Addition ELBE, GEORGE BOND, RUSSELL C III Name: Name: 12912 HICKORYWOOD LANE 501 5TH AVE NE Address: Address: City-St-Zip: LARGO, FL 33774 US City-St-Zip: ST PETERSBURG, FL 33703 US Title: () Delete Title: (X) Change () Addition Name: BOND, RUSSELL C III Name: DANIEL, TERRENCE Address: 501 5TH AVE NE Address: 5600 GULF BLVD ST PETERSBURG, FL 33703 US City-St-Zip: City-St-Zip: ST PETE BEACH, FL 33706 US

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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

Title:

Name:

Address:

City-St-Zip:

SIGNATURE: KAREN COULTAS EST 03/27/2008

() Change () Addition