

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000098722

Entity Name: SKC5, INC.

FILED
Jul 08, 2008
Secretary of State

Current Principal Place of Business:

50 UPTOWN GRAYTON CIR., UNIT 2
SANTA ROSA BEACH, FL 32459

New Principal Place of Business:

Current Mailing Address:

50 UPTOWN GRAYTON CIR., UNIT 2
SANTA ROSA BEACH, FL 32459

New Mailing Address:

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NRAI SERVICES, INC.
2731 EXECUTIVE PARK DR., STE. 4
WESTON, FL 33331 US

Name and Address of New Registered Agent:

SHIFLETT, GINA
50 UPTOWN GRAYTON CIR., UNIT 2
SANTA ROSA BEACH, FL 32459 US

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: GINA SHIFLETT

07/08/2008

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DPT () Delete
Name: ROY, KERRY L.
Address: 50 UPTOWN GRAYTON CIR., UNIT 2
City-St-Zip: SANTA ROSA BEACH, FL 32459

Title: DV (X) Delete
Name: KRAMER, SUZZANNE
Address: 50 UPTOWN GRAYTON CIR., UNIT 2
City-St-Zip: SANTA ROSA BEACH, FL 32459

Title: DS (X) Delete
Name: BREWER, HANNAH
Address: 50 UPTOWN GRAYTON CIR., UNIT 2
City-St-Zip: SANTA ROSA BEACH, FL 32459

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DPT (X) Change () Addition
Name: SHIFLETT, GINA
Address: 50 UPTOWN GRAYTON CIR., UNIT 2
City-St-Zip: SANTA ROSA BEACH, FL 32459

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 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 an address, with all other like empowered.

SIGNATURE: GINA SHIFLETT

DPT

07/08/2008

Electronic Signature of Signing Officer or Director

Date