

2008 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P92000013085

Entity Name: RED SKY, INC.

FILED
Oct 18, 2008
Secretary of State

Current Principal Place of Business:

4290 S.E. SALERNO RD
PORT SALERNO, FL 349920036

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 36
PORT SALERNO, FL 349920036

New Mailing Address:

FEI Number: 65-0382088

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HARMAN, MICHAEL R
4715 SE DESOTO RD
STUART, FL 34997 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

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: HARMAN, MICHAEL R
Address: 4290 SE SALERNO RD.
City-St-Zip: PORT SALERNO, FL 34992

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: VP () Change (X) Addition
Name: HENNESSEE, JOHN L
Address: 4745 SE DESOTO RD
City-St-Zip: STUART, FL 34997

Title: S/T () Change (X) Addition
Name: DAVIS, DANIELLE H
Address: 447 RANDOLPH ST.
City-St-Zip: NAPA, CA 94559

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: MICHAEL R. HARMAN

PRES

10/18/2008

Electronic Signature of Signing Officer or Director

Date