




FILED
Feb 01, 2005 8:00 am
Secretary of State

U U U U U U U U

DOCUMENT # S15281				Secretary of State	
1. Entity Name S & K LIMITED, INC.		02-01-2005 90030 050 ***150.00			
Principal Place of Business 6200 NAIA-VILLAGE SHOPS VERO BEACH, FL 32963		Mailing Address 6200 NAIA-VILLAGE SHOPS VERO BEACH, FL 32963			
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc. 6290 NORTH A1A		Suite, Apt. #, etc. 6290 NORTH A1A		01212005 Chg-P CR2E034 (10/03)	
City & State VERO BEACH, FL		City & State VERO BEACH, FL		4. FEI Number 65-0231945	
Zip 32963		Country INDIAN RIVER		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent	
CAMPIONE-SAUCIER, KAREN M 8351 CHINABERRY RD VERO BEACH, FL 32963				Name	
				Street Address (P.O. Box Number is Not Acceptable)	
				City	FL Zip Code
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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>					
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees			
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D CAMPIONE SAUCIER, KAREN M. 925 26TH ST. VERO BEACH, FL 32960	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	8351 Chinaberry Road Vero Beach, FL 32963	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SAUCIER, AUSTIN F 925 26TH ST VERO BEACH, FL	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	8351 Chinaberry Road Vero Beach, FL 32963	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SAUCIER, BRIAN F 925 26TH ST. VERO BEACH, FL 32960	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	8351 Chinaberry Road Vero Beach, FL 32963	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address with all other like empowered.					
SIGNATURE: 		KAREN SAUCIER		7/28/05 (442) 234-1964	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date		Daytime Phone #	