## **ANNUAL REPORT**

## 2006 FOR PROFIT CORPORATION

## Mar 29, 2006 8:00 am Secretary of State 03-29-2006 90140 024 \*\*\*150.00 **DOCUMENT # P05000157368** SCKY INDUSTRIES, INC. Mailing Address Principal Place of Business 323 LINEAGE LANE 323 LINEAGE LANE WALTERBORO, SC 29488 WALTERBORO, SC 29488 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 03132006 Chg-P CR2E034 (11/05) Applied For 4 FEI Number City & State City & State Not Applicable 20-3870512 Ζip Country \$8.75 Additional Zip Country 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent LAPLANT, ROBERT Street Address (P.O. Box Number is Not Acceptable) 201 E. KENNEDY BOULEVARD **SUITE 715** TAMPA, FL 33602 City 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 SIGNATURE. (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00 Trust Fund Contribution. Added to Fees ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 11. 10. President, Socretage Chaster Catterton Change TITLE ☐ Addition TITLE ☐ Delete NAME NAME 303 Lineage Fore STREET ADDRESS STREET ADDRESS 29488 CITY-ST-ZIP Walteburg, CITY-ST-7IP TITLE Change Addition ☐ Delete TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change Addition TITLE Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition Delete TITLE NAME NAME STREET ADDRESS STREET ADORESS

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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.

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And Lattile CHESTON J. CATTONTON
BIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

☐ Delete

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843538 0000

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**FILED**