

**2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P03000122702

**Entity Name:** SKYDIVE SOUTHWEST FLORIDA, INC.

**Current Principal Place of Business:**

2212 NW 4TH TERRACE  
CAPE CORAL, FL 33993

**Current Mailing Address:**

C/O ROBERT L. FELDMAN, ESQ.  
8900 SW 107 AVENUE #203  
MIAMI, FL 33176

**FEI Number:** 04-3779086

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

FELDMAN, ROBERT LESQ.  
8900 SW 107 AVENUE  
SUITE 203  
MIAMI, FL 33176 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:** \_\_\_\_\_

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title	DPT	Title	DS
Name	TORGEIRSON, ROY	Name	TOURON, ANNE-LAURE
Address	2212 NW 4TH TERRACE	Address	2212 NW 4TH TERRACE
City-State-Zip:	CAPE CORAL FL 33993	City-State-Zip:	CAPE CORAL FL 33993

*I hereby 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 all other like empowered.*

**SIGNATURE:** ROY TORGEIRSON

P

03/17/2015

Electronic Signature of Signing Officer/Director Detail

Date