

# **2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 718340

**FILED**  
**Feb 28, 2011**  
**Secretary of State**

**Entity Name:** FLORIDA SKYLINERS OF MIAMI, INC.

**Current Principal Place of Business:**

SOUTH FLORIDA  
MIAMI, FL 33283

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 832401  
MIAMI, FL 33283

**New Mailing Address:**

**FEI Number:** 65-0022190

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

TWIGG, DAVID  
8951 SW 60 TERRACE  
MIAMI, FL 33173 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  
Name: CLARK, ROGER  
Address: 113 PIRATES DR  
City-St-Zip: KEY LARGO, FL 33037

Title: FVP  
Name: BOGGS, CLARK  
Address: 113 PIRATES DR  
City-St-Zip: KEY LARGO, FL 33037

Title: VP  
Name: HABENICHT, BOB  
Address: 4800 SW 119 TER  
City-St-Zip: MIAMI, FL 33330

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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: MICHAEL LARIMORE

TREA

02/28/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date