

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 725110

FILED
Mar 22, 2012
Secretary of State

Entity Name: SKYVIEW ESTATES, INC.

Current Principal Place of Business:

SKYVIEW ESTATES INC
3003 SEGO LANE
LAKELAND, FL 33801

New Principal Place of Business:

Current Mailing Address:

SKYVIEW ESTATES INC
3003 SEGO LANE
LAKELAND, FL 33801

New Mailing Address:

FEI Number: 59-1438606 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

STEENHAGEN, JAMES
1922 BLUE LAKE DRIVE.
LAKELAND, FL 33801 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: LITTERAL, RICHARD
Address: 1514 SKYVIEW DRIVE
City-St-Zip: LAKELAND, FL 33801

Title: D
Name: BROWN, DAVID
Address: 3039 MIMOSA WAY
City-St-Zip: LAKELAND, FL 33801

Title: S
Name: ROWE, CONNIE
Address: 1505 HALEY LANE
City-St-Zip: LAKELAND, FL 33801

Title: V
Name: ADER, VERN
Address: 1942 BLUE LAKE DRIVE
City-St-Zip: LAKELAND, FL 33801

Title: D
Name: BUCHHEIT, CHARLES
Address: 1902 BLUE LAKE DRIVE
City-St-Zip: LAKELAND, FL 33801

Title: T
Name: WRIGHT, COLLEEN
Address: 3035 SEGO LN
City-St-Zip: LAKELAND, FL

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: COLLEEN WRIGHT

T

03/22/2012

Electronic Signature of Signing Officer or Director

Date