

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 734951

FILED  
Apr 13, 2006  
Secretary of State

**Entity Name:** SKYLINE ESTATES OWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

139 SKYLINE BLVD.  
SATELLITE BEACH, FL 329370263

**New Principal Place of Business:**

**Current Mailing Address:**

139 SKYLINE BLVD.  
SATELLITE BEACH, FL 329370263

**New Mailing Address:**

**FEI Number:** 59-1778637

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

MYERS, DALE T  
143 SKYLINE BLVD  
SATELLITE BEACH, FL 32937 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: PD ( ) Delete  
Name: MYERS, DALE T  
Address: 143 SKYLINE BLVD  
City-St-Zip: SATELLITE BEACH, FL 32937

Title: SD ( ) Delete  
Name: HILGENFELDT, CHARLES R  
Address: 147 SKYLINE BLVD  
City-St-Zip: SATELLITE BEACH, FL 329373206

Title: VD ( ) Delete  
Name: FREDRICK, BEAL G  
Address: 112 SKYLINE CIRLCE  
City-St-Zip: SATELLITE BEACH, FL 32937

Title: TD ( ) Delete  
Name: WILSON, RENATE  
Address: 193 SKYLINE BLVD  
City-St-Zip: SATELLITE BEACH, FL 32937

Title: D ( ) Delete  
Name: HICKEY, CAROL  
Address: 199 SKYLINE BLVD  
City-St-Zip: SATELLITE BEACH, FL 32937

Title: D ( ) Delete  
Name: HENDERSON, DEE  
Address: 124 SKYLINE BLVD  
City-St-Zip: SATELLITE BEACH, FL 32937

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: SD (X) Change ( ) Addition  
Name: MURPHY, ANN  
Address: 138 SKYLINE BLVD  
City-St-Zip: SATELLITE BEACH, FL 329373206

Title: VD (X) Change ( ) Addition  
Name: BEAL, FREDRICK G  
Address: 112 SKYLINE CIRLCE  
City-St-Zip: SATELLITE BEACH, FL 32937

Title: TD (X) Change ( ) Addition  
Name: WILSON, RENATE A  
Address: 193 SKYLINE BLVD  
City-St-Zip: SATELLITE BEACH, FL 32937

Title: D (X) Change ( ) Addition  
Name: GOODELL, MARYON  
Address: 189 SKYLINE COURT  
City-St-Zip: SATELLITE BEACH, FL 32937

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: RENATE A WILSON

TD

04/13/2006

Electronic Signature of Signing Officer or Director

Date