

# 2007 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# F01000005463

**FILED**  
**Mar 29, 2007**  
**Secretary of State**

**Entity Name:** SKYWAGON CORPORATION, INC.

**Current Principal Place of Business:**

112 SOUTH SEWALLS POINT ROAD  
STUART, FL 34996

**New Principal Place of Business:**

**Current Mailing Address:**

2391 SE OCEAN BLVD  
PMB 106  
STUART, FL 34996

**New Mailing Address:**

112 SOUTH SEWALLS POINT ROAD  
PMB 106  
STUART, FL 34996

**FEI Number:** 65-1135178

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

BEAN, THOMAS  
112 SOUTH SEWALLS POINT ROAD  
STUART, FL 34996 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: THOMAS BEAN

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: PST ( ) Delete  
Name: BEAN, THOMAS  
Address: 112 SOUTH SEWALLS POINT ROAD  
City-St-Zip: STUART, FL 34996

Title: CD ( ) Delete  
Name: BEAN, THOMAS  
Address: 112 SOUTH SEWALLS POINT ROAD  
City-St-Zip: STUART, FL 34996

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

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

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

SIGNATURE: THOMAS BEAN

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

MNGR

03/29/2007

\_\_\_\_\_  
Date