

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F06000007467

Entity Name: SKYWAY SOFTWARE, INC.

FILED  
Jan 23, 2007  
Secretary of State

## Current Principal Place of Business:

208 S HOOVER BLVD  
STE 100  
TAMPA, FL 33609

## New Principal Place of Business:

## Current Mailing Address:

208 S HOOVER BLVD  
STE 100  
TAMPA, FL 33609

## New Mailing Address:

FEI Number: 58-2654249

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

SLEDGE, LARRY  
208 S HOOVER BLVD  
STE 100  
TAMPA, FL 33609 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

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: C ( ) Delete  
Name: SEGERTER, DANIEL S  
Address: 208 S HOOVER BLVD - STE 100  
City-St-Zip: TAMPA, FL 33609

Title: D ( ) Delete  
Name: MOSLEY, I SIGMUND  
Address: 945 E PACES FERRY RD - STE 2450  
City-St-Zip: ATLANTA, GA 303261125

Title: D ( ) Delete  
Name: BERTRON, STEWART  
Address: 208 S HOOVER BLVD - STE 100  
City-St-Zip: TAMPA, FL 33609

Title: CEOD ( ) Delete  
Name: WALSH, SEAN  
Address: 208 S HOOVER BLVD - STE 100  
City-St-Zip: TAMPA, FL 33609

Title: O ( ) Delete  
Name: RODRIGUEZ, JARED  
Address: 208 S HOOVER BLVD - STE 100  
City-St-Zip: TAMPA, FL 33609

Title: O ( ) Delete  
Name: SLEDGE, LARRY  
Address: 208 S HOOVER BLVD - STE 100  
City-St-Zip: TAMPA, FL 33609

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: C (X) Change ( ) Addition  
Name: AEGERTER, DANIEL S  
Address: 208 S HOOVER BLVD - STE 100  
City-St-Zip: TAMPA, FL 33609

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

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

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

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: LARRY SLEDGE

O

01/23/2007

Electronic Signature of Signing Officer or Director

Date