

**2006 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Apr 17, 2006 08:00 AM**  
**Secretary of State**

**DOCUMENT # F33442**

1. Entity Name  
**SKFW MANAGEMENT CORPORATION**



Principal Place of Business  
**2910 W. BAY TO BAY BLVD  
STE 200  
TAMPA, FL 33629 US**

Mailing Address  
**2910 W. BAY TO BAY BLVD  
STE 200  
TAMPA, FL 33629 US**



04042006 No Chg-P CR2E034 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number **59-2105771** Applied For  
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional  
Fee Required**

**6. Name and Address of Current Registered Agent**

**FROST, MICHAEL H  
2910 W. BAY TO BAY BLVD  
STE 200  
TAMPA, FL 33629**

**DO NOT WRITE  
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00  
After May 1, 2006 Fee will be \$550.00**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00 May Be  
Added to Fees**

**10. OFFICERS AND DIRECTORS**

TITLE	D
NAME	SHIMBERG, MANDELL
STREET ADDRESS	100 S ASHLEY #820
CITY-ST-ZIP	TAMPA FL,
TITLE	D
NAME	KENNEDY, DAVID A
STREET ADDRESS	2910 W. BAY TO BAY BLVD #200
CITY-ST-ZIP	TAMPA, FL 33629
TITLE	PD
NAME	FROST, MICHAEL H.
STREET ADDRESS	2910 W. BAY TO BAY BLVD #200
CITY-ST-ZIP	TAMPA, FL 33629
TITLE	D
NAME	WINEBERG, HARVEY S
STREET ADDRESS	180 N LASALLE ST #2200
CITY-ST-ZIP	CHICAGO, IL
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

000000511339  
04/23/06-80043-019 150.00

**DO NOT WRITE  
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

**Michael Frost 4/14/06 (813) 221-7535**