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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

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May 14 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # K40512

(1)

SKINNER DEVELOPMENT COMPANY, INC.

Principal Place of Business 1220 S. DALE MARRY TAMPA FL 33629	Mailing Address P.O. BOX 18005 TAMPA FL 33679-8006 US	MUA				
50~	00		3. Date Incorporated or Qu 10/24/1988	· · · · · · · · · · · · · · · · · · ·	ate of Last Re 01/1996	eport
2. Principal Place of Business 21 3805 Henderson	2a. Mailing Address		4. FEI Number		 	plied For
3805 Henderson Suite Apt. #, etc.	DC 26		59-2934562		\$8.75 A	t Applicable
22	27		5. Certificate of Status Des	sired 🔲	Fee Re	
City & State	City & State		6. Election Campaign Fina		\$5.00	•
23 ampa Country	28	Country	Trust Fund Contribution 8. This corporation has list		Added to	
24 33629 25 US		30	Florida Statutes		o tax under s. ☐ No	189.032,
9. Name and Address	s of Current Registered Agent		10. Name and Address of	New Registered	Agent	
SKINNER, JOHN C.		61 Name				
4819-SOUTH DAUPHIN ST	REET, UNIT B21	82 Street Arid	ress (P.O. Box Number is Not A	cceptable)		
-TAMPA FL 33811		83 A 1	1 0 2 11 11 DE	1 700		
		Apt	: 1208	·····	[] /	
		84 City T C	impa	FL	. 85 33	
11. Pursuant to the provisions of Section	ons 607.0502 and 607.1508, Florida Statute	s, the above named corp	poration submits this statement	for the purpose of	of changing its	s registered
Office of registeruu ayem, or born, i	in the State of Florida. Such change was a	UINORZEO DY UTO DUTPORUS Irida Stabulae	(BON & DUBTO OF OFFICIORS, EFFICION	Dy accept one ap-	JOHIU HOLLI GO	Ledisce er
agent I am familiar with, and accer	nt the obligations of, Section 607.0505, Flo	illia Statutes.				
agent I am familiar with, and accep				DATE		
agent I am familiar with, and accept SIGNATURE Signature typed or printed rame of		: Registered Agent signature requi	ired when reinstating) ADDITIONS/CHANGES T	DATE TO OFFICERS AN	D DIRECTOR	S IN 12
agent I am familiar with, and accept SIGNATURE Signature typed or printed name of	of registored agent and little if applicable (NOTE	: Registered Agent signature requi			D DIRECTOR	IS IN 12
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