

# **2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N05000005349

**FILED**  
**Apr 21, 2011**  
**Secretary of State**

**Entity Name:** FLORIDA SKILLS TRUST, INCORPORATED

**Current Principal Place of Business:**

3111 MAHAN DR. SUITE 20  
TALLAHASSEE, FL 32308

**New Principal Place of Business:**

**Current Mailing Address:**

3111 MAHAN DR. SUITE 20  
TALLAHASSEE, FL 32308

**New Mailing Address:**

**FEI Number:**

**FEI Number Applied For (X)**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

MILLER, CARL F JR  
2340 BOURGOGNE DR  
TALLAHASSEE, FL 32308 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: D  
Name: BAER, KEN  
Address: 3101 MAHAN DR SUITE 20  
City-St-Zip: TALLAHASSEE, FL 32308

Title: S  
Name: MILLER, DONNA  
Address: 2340 BOURGOGNE DR  
City-St-Zip: TALLAHASSEE, FL 32308

Title: T  
Name: MANN, BILL  
Address: 2001 KURT ST  
City-St-Zip: EUSTIS, FL 32627

I hereby 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 all other like empowered.

SIGNATURE: CARL MILLER

DIR

04/21/2011

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

\_\_\_\_\_  
Date