2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000010815

FILED Apr 04, 2011 Secretary of State

Entity Name: SKYVIEW NEIGHBORHOOD ASSOCIATION PARTNERS CORPORATION

Current Principal Place of Business: New Principal Place of Business:

1110 SKYVIEW BLVD 1224 SKYVIEW COVE LAKELAND, FL 33801 LAKELAND, FL 33801

Current Mailing Address: New Mailing Address:

1110 SKYVIEW BLVD 1224 SKYVIEW COVE LAKELAND, FL 33801 LAKELAND, FL 33801

FEI Number: 30-0473181 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

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

CAUFMAN, THOMAS W 4905 W. LAUREL ST TAMPA, FL US

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: F

Name: POITRAS, LEON
Address: 1224 SKYVIEW COVE
City-St-Zip: LAKELAND, FL 33801

Title: V

Name: WINEBARGER, SHELLEY
Address: 1408 DOLPHIN DRIVE
City-St-Zip: LAKELAND, FL 33801

Title:

Name: BARNABLE, VINCENT Address: 1110 SKYVIEW BLVD N City-St-Zip: LAKELAND, FL 33801

Title:

 Name:
 PAIGE, JOANNE

 Address:
 441 PERCH PL

 City-St-Zip:
 LAKELAND, FL
 33801

Title:

 Name:
 MIGLIACCIIO, FERYN

 Address:
 427 LEISURE PL

 City-St-Zip:
 LAKELAND, FL
 33801

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: LEON POITRAS PRES 04/04/2011