

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000001233

Entity Name: SKUNKIE ACRES, INC.

FILED
Jan 12, 2009
Secretary of State

Current Principal Place of Business:

608 N.W. SOPHIE DRIVE
WHITE SPRINGS, FL 32096

New Principal Place of Business:

Current Mailing Address:

PO BOX 342
WHITE SPRINGS, FL 32096

New Mailing Address:

PO BOX 769
WHITE SPRINGS, FL 32096

FEI Number: 26-1988997

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HAAKE, BARBARA
608 NW SOPHIE DRIVE
WHITE SPRINGS, FL 32096 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: O () Delete
Name: HAAKE, BARBARA
Address: 608 NW SOPHIE DR
City-St-Zip: WHITE SPRINGS, FL 32096

Title: O () Delete
Name: HAAKE, MEGAN
Address: 608 NW SOPHIE DR
City-St-Zip: WHITE SPRINGS, FL 32096

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: BARBARA HAAKE

OWNE

01/12/2009

Electronic Signature of Signing Officer or Director

Date