

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000010128

FILED
Jul 01, 2009
Secretary of State

Entity Name: SKYWAY CAPITAL FOUNDATION, INC.

Current Principal Place of Business:

100 N TAMPA STREET SUITE 3550
TAMPA, FL 33602

New Principal Place of Business:

100 N TAMPA STREET
SUITE 3550
TAMPA, FL 33602 US

Current Mailing Address:

100 N TAMPA STREET SUITE 3550
TAMPA, FL 33602

New Mailing Address:

100 N TAMPA STREET
SUITE 3550
TAMPA, FL 33602 US

FEI Number: 26-3699282 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

CRINO, BRYAN L
100 N TAMPA STREET SUITE 3550
TAMPA, FL 33602 US

Name and Address of New Registered Agent:

CRINO, BRYAN L
100 N TAMPA STREET
SUITE 3550
TAMPA, FL 33602 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: BRYAN L. CRINO

07/01/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: CRINO, BRYAN L
Address: 100 N TAMPA STREET SUITE 3550
City-St-Zip: TAMPA, FL 33602

Title: D () Delete
Name: FEUER, SCOTT N
Address: 100 N TAMPA STREET SUITE 3550
City-St-Zip: TAMPA, FL 33602

Title: D () Delete
Name: PASSERO, JOSEPH
Address: 100 N TAMPA STREET SUITE 3550
City-St-Zip: TAMPA, FL 33602

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: BRYAN L. CRINO

D

07/01/2009

Electronic Signature of Signing Officer or Director

Date