

# **2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N19473

**FILED**  
**Jan 25, 2010**  
**Secretary of State**

**Entity Name:** SKYLINE WOODS PROPERTY OWNERS' ASSOCIATION, INC.

**Current Principal Place of Business:**

12981 TREELINE CT  
N FT. MYERS, FL 33903 US

**New Principal Place of Business:**

**Current Mailing Address:**

12981 TREELINE CT  
N FT. MYERS, FL 33903 US

**New Mailing Address:**

**FEI Number:** 59-2781552

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

SKINNER, KAREN A  
12981 TREELINE CT  
N FT. MYERS, FL 33903 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: DT  
Name: SKINNER, KAREN A  
Address: 12981 TREELINE CT  
City-St-Zip: N FT MYERS, FL 33903

Title: DV  
Name: WESTBERRY, BRUCE  
Address: 12860 TREELINE COURT  
City-St-Zip: N FT MYERS, FL 33903

Title: S  
Name: YATES, STACEY L  
Address: 12921 TREELINE COURT  
City-St-Zip: NORTH FORT MYERS, FL 33903

Title: DP  
Name: ONDREJKA, STEVE  
Address: 12891 TREELINE COURT  
City-St-Zip: NORTH FORT MYERS, FL 33903

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: KAREN A. SKINNER

DT

01/25/2010

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

\_\_\_\_\_  
Date