

2006 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N93000004092

FILED
Feb 01, 2006
Secretary of State

Entity Name: SKIDMORE ASSOCIATION, INC.

Current Principal Place of Business:

639 CYPRESS GARDENS BLVD
#526
WINTER HAVEN, FL 33884 US

New Principal Place of Business:

Current Mailing Address:

639 CYPRESS GARDENS BLVD
#526
WINTER HAVEN, FL 33884 US

New Mailing Address:

FEI Number: 59-3246546 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:

Name and Address of New Registered Agent:

EDWARD, MOORE
639 CYPRESS GARDENS BLVD
#526
WINTER HAVEN, FL 33884 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: EDWARD C MOORE

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: PATTERSON, STUART
Address: 80 JENNI ASHLEY COURT
City-St-Zip: WINTER HAVEN, FL 33884

Title: VP () Delete
Name: AYERS, CHARLES
Address: 21 SKIDMORE ROAD
City-St-Zip: WINTER HAVEN, FL 33884

Title: T () Delete
Name: MOORE, EDWARD
Address: 54 SKIDMORE ROAD
City-St-Zip: WINTER HAVEN, FL 33884

Title: S () Delete
Name: EDWARD, NORMA
Address: 29 SKIDMORE ROAD
City-St-Zip: WINTER HAVEN, FL 33884

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:

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

I hereby certify that the information supplied with this filing does not qualify for the 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: EDWARD MOORE

S

02/01/2006

Electronic Signature of Signing Officer or Director

Date