2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 23, 2009
Secretary of State

DOCUMENT# P02000039653

Entity Name: SKYWAY BC II, INC.

Current Principal Place of Business:

3410 HENDERSON BLVD.
SUITE 200
TAMPA, FL 33609

New Principal Place of Business:

3410 HENDERSON BLVD
SUITE 200
TAMPA, FL 33609

Current Mailing Address:

3410 HENDERSON BLVD.
SUITE 200
TAMPA, FL 33609

New Mailing Address:

3410 HENDERSON BLVD
SUITE 200
TAMPA, FL 33609

FEI Number: 41-2036553 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SMITH, W. LAWRENCE
101 EAST KENNEDY BLVD SUITE 3700
TAMPA, FL 33602 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

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: PD ( ) Delete
Name: KENNEDY, DAVID A
Address: 3410 HENDERSON BLVD, #200
City-St-Zip: TAMPA, FL 33609

Title: S ( ) Delete
Name: CROWDER, SHEFFIELD
Address: 3410 HENDERSON BLVD, #200
City-St-Zip: TAMPA, FL 33609

Title: VP ( ) Delete
Name: KENNEDY, JOSEPH A
Address: 3410 HENDERSON BLVD #200
City-St-Zip: TAMPA, FL 33609

Title: VP ( ) Delete
Name: BOHACEK, ERIN
Address: 3410 HENDERSON BLVD, #200
City-St-Zip: TAMPA, FL 33608

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition
Name: KENNEDY, DAVID A
Address: 3410 HENDERSON BLVD SUITE 200
City-St-Zip: TAMPA, FL 33609

Title: S (X) Change ( ) Addition
Name: CROWDER, SHEFFIELD
Address: 3410 HENDERSON BLVD SUITE 200
City-St-Zip: TAMPA, FL 33609

Title: VP (X) Change ( ) Addition
Name: KENNEDY, JOSEPH A
Address: 3410 HENDERSON BLVD SUITE 200
City-St-Zip: TAMPA, FL 33609

Title: VP (X) Change ( ) Addition
Name: BOHACEK, ERIN K
Address: 3410 HENDERSON BLVD SUITE 200
City-St-Zip: TAMPA, FL 33609

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

SIGNATURE: ERIN K BOHACEK VP 04/23/2009
Electronic Signature of Signing Officer or Director Date