

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000028726

FILED
Apr 29, 2006
Secretary of State

Entity Name: KELLY SKYCAP SERVICES, INC.

Current Principal Place of Business:

1914 18TH AVE
TAMPA, FL 33605

New Principal Place of Business:

Current Mailing Address:

1914 18TH AVE
TAMPA, FL 33605

New Mailing Address:

FEI Number: 02-0680584

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KELLY, JAMES
1914 18TH AVE
TAMPA, FL 33605 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: P () Delete
Name: KELLY, JAMES SR
Address: 1914 18TH AVENUE
City-St-Zip: TAMPA, FL 33605

Title: S () Delete
Name: KELLY, ERNESTINE
Address: 1914 18TH AVENUE
City-St-Zip: TAMPA, FL 33605

Title: GM () Delete
Name: KELLY, BONNIE
Address: 1914 18TH AVENUE
City-St-Zip: TAMPA, FL 33605

Title: MGR () Delete
Name: KELLY, JAMES JR
Address: 1914 18TH AVENUE
City-St-Zip: TAMPA, FL 33605

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: GM (X) Change () Addition
Name: KELLY, BENNIE L
Address: 1914 18TH AVENUE
City-St-Zip: TAMPA, FL 33605

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

SIGNATURE: JAMES KELLY, SR.

PRES

04/29/2006

Electronic Signature of Signing Officer or Director

Date