2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000103448

City-St-Zip:

SARASOTA, FL 34233

Entity Name: SKYDOME PROPERTIES INC

FILED Apr 30, 2008 Secretary of State

Entity Name: SKYDOME PROPERTIES INC					
Current Principal Place of Business:			New Principal Place o	New Principal Place of Business:	
STE L 121	ATEE AVE WE BEACH, FL 34				
Current Mailing Address:			New Mailing Address	New Mailing Address:	
5571 MARQUESAS CIRCLE SARASOTA, FL 34233			7061 S TAMIAMI TRAIL STE C SARASOTA, FL 34231		
FEI Number:	20-1376033	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:			Name and Address of	Name and Address of New Registered Agent:	
HARRIS, GARY P 5571 MARQUESAS CIRCLE SARASOTA, FL 34233 US			STE C	7061 S [°] TAMIAMI TRAIL	
The above in the State		submits this statement for the p	ourpose of changing its registered	office or registered agent, or both,	
SIGNATURE: LES GARDI				04/30/2008	
	Electror	ic Signature of Registered Age	ent	Date	
Election Can	npaign Financin	g Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	P () HYNDS, MICHA 613 NORTH PO HOLMES BEAC	INT DRIVE	Title: (Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	VP () HYNDS, DEBO 613 NORTH PO HOLMES BEAC	INT DRIVE	Title: (Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address:	SEC (X HARRIS, GARY 5571 MARQUE		Title: (Name: Address:	() Change()Addition	

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.

City-St-Zip:

SIGNATURE: MICHAEL HYNDS PRES 04/30/2008