

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000052838

FILED  
Feb 14, 2007  
Secretary of State

Entity Name: PROACTIVE INVESTMENTS, INC.

## Current Principal Place of Business:

1075 PINEVIEW CIRCLE  
LIVE OAK, FL 32064 US

## New Principal Place of Business:

1075 PINEVIEW CIRCLE SW  
LIVE OAK, FL 32064 US

## Current Mailing Address:

1075 PINEVIEW CIRCLE  
LIVE OAK, FL 32064 US

## New Mailing Address:

1075 PINEVIEW CIRCLE SW  
LIVE OAK, FL 32064 US

FEI Number: 20-2647548

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

AIRTH, HAL A JR  
500 SOUTH FLORIDA AVENUE  
SUITE 800  
LAKELAND, FL 33801 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: D ( ) Delete  
Name: SKIERSKI, J. QUINN  
Address: 1075 PINEVIEW CIRCLE  
City-St-Zip: LIVE OAK, FL 32064 US

Title: D ( ) Delete  
Name: SKIERSKI, CYNDI K  
Address: 1075 PINEVIEW CIRCLE  
City-St-Zip: LIVE OAK, FL 32064 US

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition  
Name: SKIERSKI, J. QUINN  
Address: 1075 PINEVIEW CIRCLE SW  
City-St-Zip: LIVE OAK, FL 32064 US

Title: D (X) Change ( ) Addition  
Name: SKIERSKI, CYNDI K  
Address: 1075 PINEVIEW CIRCLE SW  
City-St-Zip: LIVE OAK, FL 32064 US

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: CYNDI K. SKIERSKI

MGRM

02/14/2007

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date