

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P05000122445

**FILED**  
**Feb 18, 2011**  
**Secretary of State**

**Entity Name:** SKYDIVE JACKSONVILLE INC.

**Current Principal Place of Business:**

476 N WILLIAMS AVE  
TITUSVILLE, FL 32796

**New Principal Place of Business:**

**Current Mailing Address:**

476 N WILLIAMS AVE  
TITUSVILLE, FL 32796

**New Mailing Address:**

**FEI Number:** 59-3816608

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

NARDI, GREG  
476 N WILLIAMS AVE  
TITUSVILLE, FL 32796 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

**OFFICERS AND DIRECTORS:**

Title: PVST  
Name: NARDI, GREG  
Address: 9300 NORMANDY BOULEVARD B-12  
City-St-Zip: JACKSONVILLE, FL 32221

Title: D  
Name: NARDI, GREG  
Address: 9300 NORMANDY BOULEVARD B-12  
City-St-Zip: JACKSONVILLE, FL 32221

I hereby 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 all other like empowered.

SIGNATURE: GREG NARDI

PRES

02/18/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date