

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Mar 07, 2007 8:00 am**  
**Secretary of State**

03-07-2007 90014 004 \*\*\*150.00

**DOCUMENT # P05000166530**

1. Entity Name  
SKYVIEW PINES PROPERTIES, INC.



Principal Place of Business  
4435 UNION SPRINGS ROAD  
SPRING HILL, FL 34608

Mailing Address  
4435 UNION SPRINGS ROAD  
SPRING HILL, FL 34608

40030873



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

2216 Batten Rd

Suite, Apt. #, etc.

Suite, Apt. #, etc.

#

03042007

Chg-P

CR2E034 (12/06)

City & State

City & State

Brooksville, FL

4. FEI Number

20-4036574

Applied For

Not Applicable

Zip

Country

Zip

Country

34602

USA

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

PATRICK, TAMMY S  
4435 UNION SPRINGS ROAD  
SPRING HILL, FL 34608

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating.)

DATE

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2007 Fee will be \$550.00**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE T ☐ Delete  
NAME PATRICK, PATTI S  
STREET ADDRESS 2216 BATTEN ROAD  
CITY-ST-ZIP BROOKSVILLE, FL 34602

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE VP ☐ Delete  
NAME PATRICK, WILLIAM D  
STREET ADDRESS 2216 BATTEN ROAD  
CITY-ST-ZIP BROOKSVILLE, FL 34602

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE S ☐ Delete  
NAME CARTER, SANDY  
STREET ADDRESS 2208 BATTEN ROAD  
CITY-ST-ZIP BROOKSVILLE, FL 34602

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE VP ☐ Delete  
NAME CARTER, ROYCE  
STREET ADDRESS 2208 BATTEN ROAD  
CITY-ST-ZIP BROOKSVILLE, FL 34602

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE S ☐ Delete  
NAME PATRICK, TAMMY S  
STREET ADDRESS 4435 UNION SPRINGS ROAD  
CITY-ST-ZIP SPRING HILL, FL 34608

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE P ☐ Delete  
NAME CANORA, DESIREE  
STREET ADDRESS 4435 UNION SPRINGS ROAD  
CITY-ST-ZIP SPRING HILL, FL 34608

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

*Patti S. Patrick, Treasurer*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/5/07 352 7991239  
Date Daytime Phone #