## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P06000087643

Entity Name: SKYE WEST CONSTRUCTION, INC.

1454-3 PARK SHORE CIRCLE

FORT MYERS, FL 33901

Address:

City-St-Zip:

FILED Mar 20, 2009 Secretary of State

Current Principal Place of Business:			New Princ	ipal Place of Business:		
2240 W. 19 #100	ST STREET					
FORT MYE	ERS, FL 3390	)1				
Current Mailing Address:			New Maili	New Mailing Address:		
2240 W. 19	ST STREET					
#100	ERS, FL 3390	14				
FEI Number:	20-5120413	FEI Number Applied For ( )	FEI Number Not Appl	icable ( ) Certificate o	f Status Desired ( )	
Name and	Address of	Current Registered Agent:	Name and	Address of New Registe	ered Agent:	
ADKINS, S 2240 W 15 #100	TEVEN D ST STREET					
	ERS, FL 3390	)1 US				
	named entity of Florida.	submits this statement for the	purpose of changing i	ts registered office or regis	stered agent, or both,	
SIGNATUR	RE:					
	Electro	nic Signature of Registered A્	gent	Dat	re .	
Election Car	npaign Financir	ng Trust Fund Contribution ( ).				
OFFICERS AND DIRECTORS:			ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	ADKINS, STEV 1246 CANTER	) Delete /EN D TRUSTE :BURY DRIVE :, FL 33901 US	Title: Name: Address: City-St-Zip:	()Change()A	addition	
Title: Name: Address: City-St-Zip:	NEWTON, BR	ISLAND AVENUE	Title: Name: Address: City-St-Zip:	ST (X) Change ( ) A RUTTER, PATRICIA 1454-3 PARK SHORE CIRCL FORT MYERS,, FL 33901		
Title: Name: Address: City-St-Zip:	T/D ( SCHNEIDER, 1465 ROSADA FORT MYERS	N WAY	Title: Name: Address: City-St-Zip:	VP (X) Change ( ) A SCHNEIDER, TOBEY 1465 ROSADA WAY FORT MYERS, FL 33901	Addition	
Title:	S/D ()	() Delete	Title:	() Change () A	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.

Address:

City-St-Zip:

SIGNATURE: STEVEN D. ADKINS PD 03/20/2009