

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000026419

Entity Name: SKY TITLE SERVICES, INC.

FILED  
Apr 04, 2009  
Secretary of State

## Current Principal Place of Business:

9101 W COLLEGE POINTE DR, STE2  
FORT MYERS, FL 33919

## New Principal Place of Business:

8695 COLLEGE PARKWAY #2464  
FORT MYERS, FL 33919

## Current Mailing Address:

9101 W COLLEGE POINTE DR, STE2  
FORT MYERS, FL 33919

## New Mailing Address:

8695 COLLEGE PARKWAY #2464  
FORT MYERS, FL 33919

FEI Number: 26-2165750

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

ALEXSY, MARILYN  
12651 MCGREGOR BLVD.  
1-101  
FORT MYERS, FL 33919 US

## Name and Address of New Registered Agent:

ALEXSY, MARILYN  
318 N. CANAL CIRCLE  
FORT MYERS, FL 33903 US

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:

04/04/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P, D ( ) Delete  
Name: SCHWARTZ, TODD J  
Address: 12651 MCGREGOR BLVD. #1-101  
City-St-Zip: FORT MYERS, FL 33919

Title: S (X) Delete  
Name: PRECHEL, OLIVER  
Address: 12651 MCGREGOR BLVD. #1-101  
City-St-Zip: FORT MYERS, FL 33919

Title: T (X) Delete  
Name: PRECHEL, SIMONE  
Address: 12651 MCGREGOR BLVD. #1-101  
City-St-Zip: FORT MYERS, FL 33919

Title: VP (X) Delete  
Name: PRECHEL, OLIVIER  
Address: 12651 MCGREGOR BLVD. #1-101  
City-St-Zip: FORT MYERS, FL 33919

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P, D (X) Change ( ) Addition  
Name: SCHWARTZ, TODD J  
Address: 8695 COLLEGE PARKWAY #2464  
City-St-Zip: FORT MYERS, FL 33919

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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.

SIGNATURE: TODD J. SCHWARTZ

P

04/04/2009

Electronic Signature of Signing Officer or Director

Date