

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P09000059802

Entity Name: SKYLINE SOLUTIONS, INC.

**FILED**  
**Mar 05, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

1500 BEVILLE ROAD  
SUITE 606-141  
DAYTONA BEACH, FL 32114

**New Principal Place of Business:**

**Current Mailing Address:**

1500 BEVILLE ROAD  
SUITE 606-141  
DAYTONA BEACH, FL 32114

**New Mailing Address:**

FEI Number: 27-0552265

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

BROWN, ROBERT D  
1500 BEVILLE ROAD  
SUITE 606-141  
DAYTONA BEACH, FL 32114 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: P  
Name: BROWN, ROBERT D  
Address: 1500 BEVILLE ROAD, SUITE 606-141  
City-St-Zip: DAYTONA BEACH, FL 32114

Title: VP  
Name: BROWN, BRENDA J  
Address: 1500 BEVILLE ROAD, SUITE 606-141  
City-St-Zip: DAYTONA BEACH, FL 32114

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: BRENDA J. BROWN

VP

03/05/2012

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

\_\_\_\_\_  
Date