

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P09000082237

Entity Name: F.SKIPPER, INC.

**FILED**  
**Apr 08, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

275 WEST PARK LANE  
LAKE ALFRED, FL 33850 US

**New Principal Place of Business:**

**Current Mailing Address:**

275 WEST PARK LANE  
LAKE ALFRED, FL 33850 US

**New Mailing Address:**

FEI Number: 27-1062633

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

SKIPPER, FAIRLON  
275 WEST PARK LANE  
LAKE ALFRED, FL 33850 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: SKIPPER, FAIRLON  
Address: 275 WEST PARK LANE  
City-St-Zip: LAKE ALFRED, FL 33850 US

Title: D  
Name: SKIPPER, FAIRLON  
Address: 275 WEST PARK LANE  
City-St-Zip: LAKE ALFRED, FL 33850 US

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: FAIRLON SKIPPER

PVST

04/08/2011

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

\_\_\_\_\_  
Date