

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000033595

FILED
Apr 04, 2005
Secretary of State

Entity Name: SKYBRIGHT SKYLIGHTS OF S.W. FL INC.

Current Principal Place of Business:

917 SE 13TH AVE
CAPE CORAL, FL 33990

New Principal Place of Business:

Current Mailing Address:

917 SE 13TH AVE
CAPE CORAL, FL 33990

New Mailing Address:

FEI Number: 52-2025781

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MANKE, BRIAN J
1718 SE 28 ST
CAPE CORAL, FL 33990 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: MANKE, BRIAN J
Address: 1718 SE 28 ST
City-St-Zip: CAPE CORAL, FL 33990

Title: VP () Delete
Name: MANKE, ANGELICA
Address: 1718 SE 28 ST
City-St-Zip: CAPE CORAL, FL 33990

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: VP () Change (X) Addition
Name: CANNON, RYAN B
Address: 1718 SE 28TH ST
City-St-Zip: CAPE CORAL, FL 33904

Title: VP () Change (X) Addition
Name: MANKE, TODD S
Address: 1718 SE 28TH ST
City-St-Zip: CAPE CORAL, FL 33904

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: BRIAN J. MANKE

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04/04/2005

Electronic Signature of Signing Officer or Director

Date