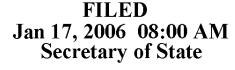
2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P97000035792 1. Entity Name BLUÉ SKY COMPUTER SYSTEMS, INC. Principal Place of Business Mailing Address 13418 LAKE TURNBERRY CIRCLE 4270 ALOMA AVE ORLANDO, FL 32828 US SUITE 124-60C WINTER PARK, FL 32792





DO NOT WRITE IN THIS SPACE

01092006 No Chg-P		CR2E034 (11/05)			
4. FEI Number 59-3456	488				
5. Certificate of	Status Desired		\$8.75 Additional		

Fee Required

6. Name and Address of Current Registered Agent

GORDON, DONALD S 13418 LAKE TURNBERRY CIRCLE ORLANDO, FL 32828

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				114	IIIIO OFACE
8. The above the obligation	named entity submits this statement for the poons of registered agent.	} purpose of changing its registered	d office or	registered agent, or b	ooth, in the State of Florida. I am familiar with, and acc
SIGNATURE_					
	Signature, typed or printed name of registered agent and title	if applicable (NOTE, Registered	Agent signatur	re required when reinstating)	QATE
	E NOW!!! FEE IS \$150.00 ay 1, 2006 Fee will be \$550.00	Election Campaign Financ Trust Fund Contribution,	ing 🗆	\$5.00 May Be Added to Fees	
10.	OFFICERS AND DIREC	CTORS {			
TITLE NAME STREET ADDRESS CITY-SY-ZIP	P GORDON, DONALD S 13418 ŁAKE TURNBERRY CIRCLE ORLANDO, FL 32828				
TITLE NAME STREET ADDRESS CITY-ST-ZIP					01/19/06-800/2-023 150.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP				DO	NOT WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP				IN	THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
TITLE MAME STREET ADDRESS CITY-ST-ZIP					
12. I bereby r	certify that the information supplied with this f	iling does not qualify for the exer	motions ec	ontained in Chanter 1	19. Florida Statutes. I further certify that the information

indicated on this report or supplies with his filling coes not quality for the exemptions contained 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 signature shall have the same legal effect as if made under oath, that I am an officer or direction the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 10 or Block 11 changed, or on an attachment with an address, with all atther like empowered.

SIGNATURE:

IG OFFICER OR DIRECTOR