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Feb 17, 1999 8:00am
Secretary of State

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PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P97000107614

1. Corporation Name

SKYLER DAYTONA, INC.

Principal Place of Business

125 W ROMANA STREET
SUITE 400
PENSACOLA FL 32501

Mailing Address

125 W ROMANA STREET
SUITE 400
PENSACOLA FL 32501

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

12/23/1997

4. FEI Number

59-3483152

Applied For

Not Applicable

5. Certificate of Status Desired



\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution



\$5.00 May Be
Added to Fees

8. This corporation owes the current year Intangible
Personal Property Tax.



Yes

No

2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

24

Country

25

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

29

Country

30

9. Name and Address of Current Registered Agent

BELL, SCOTT J
125 W ROMANA STREET
SUITE 400
PENSACOLA FL 32501

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE D
NAME BELL, SCOTT J
STREET ADDRESS 125 W ROMANA ST, #400
CITY-ST-ZIP PENSACOLA FL 32501

DELETE

TITLE D
NAME FOSTER, DANA R
STREET ADDRESS 125 W ROMANA ST, #400
CITY-ST-ZIP PENSACOLA FL 32501

DELETE

TITLE D
NAME TOLAN, JOHN J JR
STREET ADDRESS 125 W ROMANA ST, #400
CITY-ST-ZIP PENSACOLA FL 32501

DELETE

TITLE D
NAME HOLLOWAY, J. L.
STREET ADDRESS 2372 HWY 80 WEST
CITY-ST-ZIP JACKSON MS 39204

DELETE

TITLE D
NAME ST. PE', GERLAD
STREET ADDRESS 1000 LITTON ACCESS RD
CITY-ST-ZIP PASCAGOULA MS 39567

DELETE

TITLE D
NAME TREHERN, W. EDWARD
STREET ADDRESS 2957 MARKET STREET
CITY-ST-ZIP PASCAGOULA MS 39567

DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

Change Addition

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

Change Addition

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

Change Addition

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

Change Addition

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

Change Addition

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

Change Addition

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 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 in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/12/99

Date

850-432-0650

Daytime Phone #

CR2E034 (11/98)