PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # P98000072785

1. Corporation Name

SKYLARK PROPERTIES, INC.

Principal Place of Business
3455 CHENEY HIGHWAY

FILED Apr 06, 1999 8:00 am Secretary of State

04-06-1999 90055 024 ***150.00



Principal Place of Business Mailing Address											
3455 CHENEY	HIGHWAY				455 CHENEY HIGHWAY						
TITUSVILLE FL	32780			Tſ	ITUSVILLE FL 32780				DO NOT WRITE IN THIS SPACE		
									3. Date Incorporated or Qualified		
									08/20/1998		
• Driverinal D	lane of Dunia			1 2-	a. Mailing Address				4. FEI Number Applied For		
2. Principal P	race or Busir	1888		 					59-3542170 Not Applicable		
21	# oto			Suite, Apt. #, etc.					\$8.75 Additional		
Suite, Apt.	#, etc.			27					5. Certificate of Status Desired Fee Required		
City & Stat				City & State					6. Election Campaign Financing \$5.00 May Be		
—				28					Trust Fund Contribution Added to Fees		
23 Zip	·-		Country	120	Zip Country				8. This corporation owes the current year Intangible		
24		25 29 30					•		Personal Property Tax.		
24	9 Name		Address of Current			1991	Γ-		10. Name and Address of New Registered Agent		
-	0						81	Name	me		
LEE,	, CAROL A	NN									
3455	5 CHENEY	HIGH	IWAY		82 Street Addr				eet Address (P.O. Box Number is Not Acceptable)		
TITU	ISVILLE FL	3278	0		83						
							84	City	FL 85 Zip Code		
11. Pursuant	to the provis	ions	of Sections 607.0502	and	607.1508, Florida Stat	utes, the a	bove	-named	ned corporation submits this statement for the purpose of changing its registered		
office or r	ronieterod an	ant r	r both in the Staterot	f Flor	rida. Such change was of, Section 607.0505, F	authorize	יס נ	tne corb	corporation's board of directors. I hereby accept the appointment as registered		
		nan, an	d docept. In our game	<i>a</i>	e .				3/3/99		
SIGNATURE	Signature, typed	or prin	ed name of registered agent	and title	le if epplicable. (NO	TE: Registered	Agen	t signature	ture required when reinstating) DATE		
12.			OFFICERS AND	DIR	RECTORS	13.			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE					☐ DELETE	1,1 ∏	TLE		PLES / X ENT Change Addition		
NAME						1.2 N	AME		CAROL B. LEE		
STREET ADDRESS						1.3 \$	TREET	FADDRESS	ESS 3455 CHENEY HWY		
CITY-ST-ZIP	_					1.4 C	TY-\$	T-ZIP	THUSTILLE FC 32710		
TITLE					☐ DELETE	2.1 T	TLE		TITUSTICLE FC 32780 SECRITARY Addition		
NAME	Į.					2.2 N	AME.		TEMPLE WATRING		
STREET ADDRESS	:					2.3 \$	TREET	FADDRESS			
CITY-ST-ZIP	· · · · · · · · · · · · · · · · · · ·	-			-	2.40	ITY-S	T-ZIP	THOSYPCEO PC 32780		
TITLE					☐ DELETE	3.1 T	TLE		☐ Change ☐ Addition		
NAME						3.2 N	AMÉ				
STREET ADDRESS						3.3 S	TREET	ADDRESS	(ESS		
CITY-ST-ZIP						3.4. 0	TY-S	T-ZIP			
TITLE					□ DELETE	4.1 T	TLE		☐ Change ☐ Addition		
NAME						4.21	IAME				
STREET ADDRESS	:					4.3 S	TREET	ADDRESS	ŒSS :		
CITY-ST-ZIP						4,4 C	ITY-S	T-ZIP			
TITLE			<u></u>		☐ DELETE	5.1 T	TLE		☐ Change ☐ Addition		
NAME						5.2 N	AME				
STREET ADDRESS	,					5.3 S	TREET	TADDRESS	ÆSS		
CITY-ST-ZIP)					5.4 0	ITY-S	T-ZIP			
TITLE	T				☐ DELETE	6.1 T	TLE		☐ Change ☐ Addition		
NAME						6.2 N	AME				
STREET ADDRESS	s					6.3 S	TREET	TADDRESS	ÆSS		
	1						m/ 0	T 710			

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 empswered 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