2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000040621

KYRIACOU, KATHERINE

PALM COAST, FL 32137

25 NANTUCKET DR

Name:

Address:

City-St-Zip:

FILED Feb 12, 2009 Secretary of State

Entity Name: SKALA PROPERTIES, INC.					
Current Principal Place of Business:			New Principal Pla	New Principal Place of Business:	
	CKET DRIVE ST, FL 32137				
Current Mailing Address:			New Mailing Address:		
	CKET DRIVE ST, FL 32137				
FEI Number:	54-3572666	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:			Name and Addres	Name and Address of New Registered Agent:	
DONALD W. DUNCAN, P.A. 25 FLORIDA PARK DR. NORTH PALM COAST, FL 32137 US			21 NANTUCKÉT D	YEROLEMOU, CHRISO 21 NANTUCKET DRIVE PALM COAST, FL 32137 US	
The above in the State		ubmits this statement for the pu	urpose of changing its registe	ered office or registered agent, or both,	
SIGNATURE: CHRISO YEROLEMOU				02/12/2009	
Electronic Signature of Registered Agent			nt	Date	
Election Carr	npaign Financing	Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITIONS/CHAN	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	P () YEROLEMOU, C 21 NANTUCKET PALM COAST, F	DR.	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	VP () KYRIAKOUDES, 3406 BRAGG DF WILMINGTON, N	₹	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	S () KYROS, JERRY 1950 LONGFELI EAST MEADOW	LOW AVE	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title:	T ()	Delete	Title:	() Change () Addition	

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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.

Name:

Address:

City-St-Zip:

SIGNATURE: CHRISO YEROLEMOU PRES 02/12/2009