

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT  
CORPORATION  
ANNUAL REPORT  
1999



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

FILED  
Apr 21, 1999 8:00 am  
Secretary of State

04-21-1999 90139 036 \*\*\*158.75

DOCUMENT # V54547

1. Corporation Name  
BIG SKY LAKE CORPORATION

Principal Place of Business  
19612 SW 69 PLACE  
FT. LAUDERDALE FL 33332  
US

Mailing Address  
19612 SW 69 PLACE  
FORT LAUDERDALE FL 33332  
US



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

07/31/1992

4. FEI Number  
65-0353686

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

9. Name and Address of Current Registered Agent

NESS, FRANK E.  
4840 SW 70 TERR.  
DAVIE FL 33314

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 ☐ DELETE  
NAME BERGERON, RONALD M SR  
STREET ADDRESS 21111 SW 16 ST.  
CITY-ST-ZIP FT. LAUDERDALE FL

TITLE D ☐ DELETE  
NAME BERGERON, RONALD M JR  
STREET ADDRESS 5801 SW 195 TERR  
CITY-ST-ZIP FT. LAUDERDALE FL

TITLE D ☐ DELETE  
NAME BERGERON, LONNIE N  
STREET ADDRESS 20400 SW 51 STREET  
CITY-ST-ZIP FT. LAUDERDALE FL

TITLE D ☐ DELETE  
NAME BERGERON, LONNIE T  
STREET ADDRESS 1715 ST TROPEZ CT  
CITY-ST-ZIP KISSIMMEE FL 34744

TITLE D ☐ DELETE  
NAME NESS, FRANK E  
STREET ADDRESS 4840 SW 70 TERR  
CITY-ST-ZIP DAVIE FL

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

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

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

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

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

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

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

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 REQUIRED  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/19/99  
Date

954-680-0223  
Daytime Phone #

CR2E034 (11/98)