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TALLAHASSEE, FLORIDA

2004 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT # V71542

1. Entity Name
SKYWAY DRIVE INDUSTRIAL PARK CORPORATION

94068889

Principal Place of Business	Mailing Address
341 SKYWAY DR BOX 2 BLDG #2 UNIT H/K EDGEWATER, FL 32132	341 SKYWAY DR BOX 2 BLDG #2 UNIT H/K EDGEWATER, FL 32132 US

04152004 Chg-P CR2E034 (10/03)

2. Principal Place of Business	3. Mailing Address
341 SKYWAY DRIVE	341 SKYWAY DRIVE
Suite, Apt. #, etc.: BOX 2, BUILDING 2	Suite, Apt. #, etc.: BOX 2, BUILDING 2
City & State: EDGEWATER, FL	City & State: EDGEWATER, FL
Zip: 32132 Country: VOLUSIA	Zip: 32132 Country: VOLUSIA

4. FEI Number 59-3149819 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

CRILE, GAYEL M
8 CUNNINGHAN DRIVE
NEW SMYRNA BEACH, FL 32168

7. Name and Address of New Registered Agent

Name: Jerry D. Anderson
Street Address (P.O. Box Number is Not Acceptable): 341 Skyway Drive Box 2 Building 2
City: Edgewater FL Zip Code: 32132

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE: Jerry D. Anderson [signature] DATE: 4-23-04
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

Amended AR Is $61.25

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DPVT CRILE, GAYEL M 8 CUNNINGHAM DRIVE NEW SMYRNA BEACH, FL 32168 ☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DP Jerry D. Anderson 341 Skyway DR Box 2 BLDG 2 Edgewater, FL 32132 ☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DST Jody Anderson 341 Skyway DR Box 2 BLDG 2 Edgewater, FL 32132 ☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition

5/11

12. 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 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: [signature] 4-23-04 (386)426-0422
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

Jerry D. Anderson