2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N93000002737

FILED Jaņ 06, 2<u>00</u>6 Secretary of State

Entity Name: SOUTHWEST FLORIDA ROMANCE WRITERS, INC.

Current Principal Place of Business: New Principal Place of Business:

12100 LIVE OAK DR.

FORT MYERS, FL 33908 US

Current Mailing Address: New Mailing Address:

12100 LIVE OAK DR

FORT MYERS, FL 33908 US

FEI Number: 74-2641648 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

DEVINE, SUSANN 12100 LÍVE OAK DR.

FORT MYERS, FL 33908 US

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.

SIGNATURE:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change () Addition

() Delete O'KEY, DIANE Name: Name:

HARRINGTON, JEAN 801 SW 2ND AVE. Address: 1570 CLERMONT DRIVE, #201 Address:

City-St-Zip: CAPE CORAL, FL 33991 City-St-Zip: NAPLES, FL 34109

Title: VD Title: VD (X) Change () Addition () Delete

Name: THOMPSON, NANCY Name: WAINSCOTT, TINA Address: 707 REEF PT. CIRCLE Address: 5881 PAINTED LEAF LANE City-St-Zip: NAPLES, FL 34108 City-St-Zip: NAPLES, FL 34116

Title: () Delete Title: () Change () Addition

DEVINE, SUSANN Name: Name: 12100 LIVE OAK DR Address: Address: City-St-Zip: FORT MYERS, FL 33908 City-St-Zip:

Title: SD () Delete Title: SD (X) Change () Addition

AMBROSE, MARTY Name: Name: GALAN, CHRIS

12780 AUBREY LN 4020 WINKLER AVE. EXT. #205 Address: Address: City-St-Zip: BOKEELIA, FL 33922 City-St-Zip: FORT MYERS, FL 33916

I hereby certify that the information supplied with this filing does not qualify for the 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: SUSANN DEVINE TD 01/06/2006