

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000001825

FILED
Sep 12, 2007
Secretary of State

Entity Name: SW ALPINE COUNTRY HOME SWEET HOME, INC.

Current Principal Place of Business:

675 E PASO FINO CIRCLE
MONTURA RANCHES, FL 33440

New Principal Place of Business:

Current Mailing Address:

675 E PASO FINO CIRCLE
MONTURA RANCHES, FL 33440

New Mailing Address:

FEI Number: 20-2119386

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SCHIERA, ROBIN
675 E PASO FINO CIRCLE
MONTURA RANCHES, FL 33440 US

Name and Address of New Registered Agent:

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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: LOTITO, ELEANORA
Address: 675 E PASO FINO CIRCLE
City-St-Zip: MONTURA RANCHES, FL 33440

Title: C () Delete
Name: SCHEIRA, ROBIN
Address: 675 E PASO FINO CIRCLE
City-St-Zip: MONTURA RANCHES, FL 33440

Title: VP (X) Delete
Name: WARD, JOSEPH
Address: 675 E PASO FINO CIRCLE
City-St-Zip: MONTURA RANCHES, FL 33440

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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.

SIGNATURE: ROBIN SCHIERA

C

09/12/2007

Electronic Signature of Signing Officer or Director

_____ Date