

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P98000052414
1. Entity Name
SOUTHWEST FLORIDA EXECUTIVE SERVICES, INC.



FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
04 SEP 21 PM 12:06
500041259155
09/22/04--01049--001 **158.76

Principal Place of Business
1342 COLONIAL BLVD
K-101
FT MYERS, FL 33907

Mailing Address
1342 COLONIAL BLVD
K-101
FT MYERS, FL 33907

500041259155 SC
09/22/04--01049--001 **158.76



08262004 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
65-0742437

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

ZEHNER, DOLORES
1342 COLONIAL BLVD
K-101
FT MYERS, FL 33907

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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: *Dolores Zehner / D. Jane Zehner* DATE: *09/07/2004*
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$150.00 Due by September 8, 2004

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

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

10. OFFICERS AND DIRECTORS

TITLE	PVST
NAME	ZEHNER, DOLORES
STREET ADDRESS	1342 COLONIAL BLVD STE K-101
CITY-ST-ZIP	FT MYERS, FL 33907
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

DO NOT WRITE IN THIS SPACE

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(l), 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: *Dolores Zehner / D. Jane Zehner* Date: *09-07-2004*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR