2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000080343

Address:

2230 SOUTHEAST 19 PLACE

City-St-Zip: CAPE CORAL, FL 33990

Entity Name: SOUTHWEST FLORIDA FAMILY, LLC

FILED Apr 28, 2009 Secretary of State

Current Principal Place of Business:		New Principal Place	New Principal Place of Business:	
	TAMIAMI TRAIL SUITE 2 T. MYERS, FL 33903			
Current Mailing Address:		New Mailing Address	New Mailing Address:	
	TAMIAMI TRAIL SUITE 2 T. MYERS, FL 33903			
FEI Number	: 20-1885296 FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and	l Address of Current Registered Agent	: Name and Address o	f New Registered Agent:	
The above	BRUCE D 'AL PALM SQUARE BLVD., SUITE 320 ERS, FL 33904 US e named entity submits this statement for the of Florida.	he purpose of changing its registered	d office or registered agent, or both	
SIGNATUI				
01011/1101	Electronic Signature of Registered	Agent	Date	
MANAGING MEMBERS/MANAGERS:		ADDITIONS/CHANGES:	ADDITIONS/CHANGES:	
Title: Name: Address: City-St-Zip:	MGRM () Delete CASE, MICHAEL W 2710 EL DORADO PARKWAY CAPE CORAL, FL 33914	Title: Name: Address: City-St-Zip:	()Change ()Addition	
Title: Name: Address: City-St-Zip:	MGRM () Delete REICHERT, TIMOTHY 2819 SOUTHWEST 46TH STREET CAPE CORAL, FL 33914	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	MGRM () Delete ROSSMAN, DENNIS 1207 NORTHWEST 18TH STREET CAPE CORAL, FL 33993	Title: Name: Address: City-St-Zip:	()Change ()Addition	
Title: Name:	MGRM () Delete TRAKHTENBERG, MIKHAIL	Title: Name:	() Change () Addition	

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 is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

Address:

City-St-Zip:

SIGNATURE: MICHAEL W CASE 04/28/2009