I hereby 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 all other like empowered.

SIGNATURE: CRISTINA WILLIAMS

Electronic Signature of Signing Officer/Director Detail

Entity Name: KREWE OF S.W.A.T. INC.

Current Principal Place of Business:

1179 CRANE COVE BLVD. GULF BREEZE, FL 32563

Current Mailing Address:

1179 CRANE COVE BLVD. GULF BREEZE, FL 32563

FEI Number: 47-4611514

Name and Address of Current Registered Agent:

WILLIAMS, CRISTINA 1179 CRANE COVE BLVD GULF BREEZE, FL 32563 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:	CRISTINA WILLIAMS			03/23/2018
	Electronic Signature of Registered Agent			Date
Officer/Director Detail :				
Title	PD	Title	VP D	
Name	WILLIAMS, CRISTINA	Name	CIANO, MADRINA	
Address	1179 CRANE COVE BLVD	Address	514 EVENTIDE DR	
City-State-Zip:	GULF BREEZE FL 32563	City-State-Zip:	GULF BREEZE FL 32561	
Title	TD	Title	S D	
Name	WILLIAMS, BRIAN	Name	CIANO, MARK	
Address	1179 CRANE COVE BLVD	Address	514 EVENTIDE DR	
City-State-Zip:	GULF BREEZE FL 32563	City-State-Zip:	GULF BREEZE FL 32561	

PRESIDENT

03/23/2018

FILED Mar 23, 2018 Secretary of State CC4135606632

Certificate of Status Desired: No

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Date