

**2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L12000097580

**Entity Name:** SCHWORM ENTERPRISES OF SW FLORIDA, LLC

**Current Principal Place of Business:**

13213 GASPARILLA ROAD  
UNIT 602  
PLACIDA, FL 33946

**Current Mailing Address:**

13213 GASPARILLA ROAD  
UNIT 602  
PLACIDA, FL 33946

**FEI Number:** 46-0927675

**Certificate of Status Desired:** No

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

MALLONEE, JAMES W  
946 TAMiami TRAIL, #206  
PORT CHARLOTTE, FL 33953 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

**Authorized Person(s) Detail :**

Title MGRM  
Name SCHWORM, EARL F  
Address 13213 GASPARILLA ROAD, #602  
City-State-Zip: PLACIDA FL 33946

Title MGRM  
Name SCHWORM, LAVOHN G  
Address 13213 GASPARILLA ROAD, #602  
City-State-Zip: PLACIDA FL 33946

Title MGRM  
Name SCHWORM, DAVID E  
Address 13213 GASPARILLA ROAD, #602  
City-State-Zip: PLACIDA FL 33946

Title MGRM  
Name WILLE, KAREN L  
Address 13213 GASPARILLA ROAD, #602  
City-State-Zip: PLACIDA FL 33946

*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 a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** EARL F SCHWORM

**PRESIDENT**

**01/28/2014**

Electronic Signature of Signing Authorized Person(s) Detail

Date