

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 230667

FILED
Jan 20, 2009
Secretary of State

Entity Name: SWARTSEL PROPERTIES, INC.

Current Principal Place of Business:

4409 GRAND BLVD.
NEW PORT RICHEY, FL 34652

New Principal Place of Business:

Current Mailing Address:

4409 GRAND BLVD.
NEW PORT RICHEY, FL 34652

New Mailing Address:

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SWARTSEL, E F
4409 GRAND BLVD.
NEW PORT RICHEY, FL 34652 US

Name and Address of New Registered Agent:

SWARTSEL, E. F
4409 GRAND BLVD.
NEW PORT RICHEY, FL 34652 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: E.F. SWARTSEL

01/20/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: SWARTSEL, E F,
Address: 2825 BLUFF BLVD.
City-St-Zip: HOLIDAY, FL 34691

Title: V () Delete
Name: SWARTSEL, MARK E,
Address: 5409 COTEE RIVER DR
City-St-Zip: NEW PORT RICHEY, FL 34652

Title: V () Delete
Name: SWARTSEL, MATTHEW G,
Address: 2825 BLUFF BLVD
City-St-Zip: HOLIDAY, FL 34691

Title: ST () Delete
Name: HAYES, MAJEL E
Address: 5224 MILLER'S BOYOU DRIVE
City-St-Zip: PORT RICHEY, FL 34668

Title: D () Delete
Name: SWARTSEL, MAJEL T.
Address: 2825 BLUFF BLVD.
City-St-Zip: HOLIDAY, FL 34691

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: SWARTSEL, E. F
Address: 2825 BLUFF BLVD.
City-St-Zip: HOLIDAY, FL 34691

Title: V (X) Change () Addition
Name: SWARTSEL, MARK E
Address: 5409 COTEE RIVER DR
City-St-Zip: NEW PORT RICHEY, FL 34652

Title: V (X) Change () Addition
Name: SWARTSEL, MATTHEW G
Address: 2825 BLUFF BLVD
City-St-Zip: HOLIDAY, FL 34691

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: E.F. SWARTSEL

P

01/20/2009

Electronic Signature of Signing Officer or Director

Date