

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # 408037

1. Entity Name
SAWDY ENTERPRISES, INC.



Principal Place of Business

**735-15TH AVENUE DRIVE EAST
PALMETTO, FL 34221**

Mailing Address

**735-15TH AVENUE DRIVE EAST
PALMETTO, FL 34221**

FILED
Jul 29, 2005 08:00 AM
Secretary of State



07262005 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-1478565

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

**KAKLIS, V. WILLIAM
1400 4TH AVE. W.
BRADENTON, FL 34205**

**DO NOT WRITE
IN THIS SPACE**

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00
Due by September 7, 2005**

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 NAME STREET ADDRESS CITY-ST-ZIP	P SAWDY, MICHEAL WAYNE 735-15TH AVENUE DRIVE E PALMETTO, FL 34221
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP SAWDY, WILLIAM 735 15 AVE DR E PALMETTO, FL 34221
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S THOENTON, PALMCE 735 15 AVE DR E PALMETTO, FL 34221
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07/29/05-80001-015 150.00

**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)(f), 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:

Michael Wayne Sawdy
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7/27/05 941 722-4321
Date Daytime Phone #