



# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Apr 07, 2008 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # 522040</b> 1. Entity Name S & W ASSOCIATES, INC.	
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Principal Place of Business 2630 OKEECHOBEE LANE FT LAUDERDALE, FL 33312	Mailing Address 2630 OKEECHOBEE LANE FT LAUDERDALE, FL 33312
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DO NOT WRITE IN THIS SPACE

	
04042008 No Chg-P CR2E034 (11/05)	
4. FEI Number 59-1739554	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

LEWIS, WILLIAM R  
2630 OKEECHOBEE LANE  
FT LAUDERDALE, FL 33312

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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

<b>FILE NOW!! FEE IS \$150.00</b> <b>After May 1, 2008 Fee will be \$550.00</b>	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>	UN00000895130 04/18/08-80001-020 150.00
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10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY - ST - ZIP	PD LEWIS, WILLIAM R 2630 OKEECHOBEE LANE FT LAUDERDALE, FL
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VP LEWIS, SALLY J 2630 OKEECHOBEE LANE FT LAUDERDALE, FL 33312
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 807, 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:** William R Lewis **WILLIAM R LEWIS** 04/04/2008 957321 0065

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #