2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 30, 2009
Secretary of State

DOCUMENT# 573857

Entity Name: S.W. COWBOY, INC.

Current Principal Place of Business:

299 DONDANVILLE RD.
ST AUGUSTINE, FL 32080

New Principal Place of Business:

Current Mailing Address:

299 DONDANVILLE RD.
ST AUGUSTINE, FL 32080

New Mailing Address:

FEI Number: 59-1827386 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

LAWLOR, PETER
11 OAK AVE V.B.
ST. AUGUSTINE, FL 32084 US

Name and Address of New Registered Agent:

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

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title:	T	( ) Delete
Name:	WHITE, TERRY	
Address:	11 OAK AVE. V.B.	
City-St-Zip:	ST. AUGUSTINE, FL	
Title:	V	( ) Delete
Name:	WEGNER, JUDITH	
Address:	11 A OAK AVE V.B.	
City-St-Zip:	ST. AUGUSTINE, FL	
Title:	P	( ) Delete
Name:	SINGLETON, SCOTT	
Address:	11 A OAK AVE V.B.	
City-St-Zip:	ST. AUGUSTINE, FL	
Title:	S	( ) Delete
Name:	DROUILLARD, SHELLY	
Address:	11A OAK AVE. V.B.	
City-St-Zip:	ST. AUGUSTINE, FL	
Title:	AS	( ) Delete
Name:	LAWLOR, PETER	
Address:	11 OAK AVENUE	
City-St-Zip:	SAINT AUGUSTINE, FL 32084	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
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: PETER LAWLOR AS 04/30/2009

Electronic Signature of Signing Officer or Director — Date