

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 611130

Entity Name: JON F. SWIFT, INC.

FILED
Jan 26, 2009
Secretary of State

Current Principal Place of Business:

2221 8TH ST
SARASOTA, FL 34237

New Principal Place of Business:

Current Mailing Address:

2221 8TH ST
SARASOTA, FL 34237

New Mailing Address:

FEI Number: 59-1897037 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

SWIFT, JON F.
1613 KENILWORTH
SARASOTA, FL 34231 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: PTD () Delete
Name: SWIFT, JON F.
Address: 1613 KENILWORTH
City-St-Zip: SARASOTA, FL 34231

Title: S () Delete
Name: SWIFT, JASON F.
Address: 4153 CAMINO REAL
City-St-Zip: SARASOTA, FL

Title: V () Delete
Name: AYCOCK, JOE C
Address: 109 MANIZAKS AVE
City-St-Zip: PUNTA GORDA, FL

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:

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: JON F. SWIFT

PTD

01/26/2009

Electronic Signature of Signing Officer or Director

Date