2009 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

FILED
Dec 03, 2009
Secretary of State

DOCUMENT# 641694

Entity Name: DEL SWILLEY, INC.

Current Principal Place of Business:

170 COMMERCE ROAD
SUITE #5
BOYNTON BEACH, FL 334269364

New Principal Place of Business:

1810 HYPOLUXO ROAD
SUITE D-6
LAKE WORTH, FL 334624055

Current Mailing Address:

170 COMMERCE ROAD
SUITE #5
BOYNTON BEACH, FL 334269364

New Mailing Address:

1810 HYPOLUXO ROAD
SUITE D-6
LAKE WORTH, FL 334624055

FEI Number: 59-1945084 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SWILLEY, TIMOTHY W
170 COMMERCE ROAD
SUITE #5
BOYNTON BCH., FL 33426 US

Name and Address of New Registered Agent:

SWILLEY, TIMOTHY W
1810 HYPOLUXO ROAD
SUITE D-6
LAKE WORTH, FL 334624055 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: _____ 12/03/2009
Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title: PD ( ) Delete
Name: SWILLEY, TIMOTHY W
Address: 170 COMMERCE ROAD, SUITE #5
City-St-Zip: BOYNTON BEACH, FL 33426

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition
Name: SWILLEY, TIMOTHY W
Address: 1810 HYPOLUXO ROAD, SUITE D-6
City-St-Zip: LAKE WORTH, FL 334624055

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: TIMOTHY SWILLEY PD 12/03/2009
Electronic Signature of Signing Officer or Director — Date