

2012 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED**
Jul 11, 2012
Secretary of State

DOCUMENT# 759793

Entity Name: SOUTHWEST REGIONAL MANUFACTURERS ASSOCIATION, INC.**Current Principal Place of Business:**9454 BEGONIA CT.
SANIBEL, FL 33957**New Principal Place of Business:**762 SUNSET VISTA DR.
FORT MYERS, FL 33919**Current Mailing Address:**9454 BEGONIA CT.
SANIBEL, FL 33957**New Mailing Address:**762 SUNSET VISTA DR.
FORT MYERS, FL 33919**FEI Number:** 59-2191751**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**SADLER, CHESTER
9454 BEGONIA CT.
SANIBEL, FL 33957 US**Name and Address of New Registered Agent:**ALLEN, ELIZABETH A
762 SUNSET VISTA DR.
FORT MYERS, FL 33919 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: ELIZABETH A. ALLEN

07/11/2012

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P
Name: CHAMBERS, MATT
Address: 2443 SW PINE ISLAND RD
City-St-Zip: CAPE CORAL, FL 33991

Title: T
Name: ZICCARELLI, DAVID
Address: 9696 BONITA BEACH ROAD, SUITE 103
City-St-Zip: BONITA SPRINGS, FL 34135

Title: ED
Name: ALLEN, ELIZABETH A
Address: 762 SUNSET VISTA DR.
City-St-Zip: FORT MYERS, FL 33919

Title: VP
Name: HAWKESWORTH, KEVIN
Address: 25190 BERNWOOD DR
City-St-Zip: BONITA SPRINGS, FL 34135

I hereby 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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: ELIZABETH A. ALLEN

ED

07/11/2012

Electronic Signature of Signing Officer or Director

Date