

# 2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Apr 23, 2003 8:00 am**  
**Secretary of State**

04-23-2003 90162 005 \*\*\*150.00

**DOCUMENT # 846500**

1. Entity Name  
**SWIDERSKI IMPLEMENT & LIVESTOCK CO., INC.**



Principal Place of Business  
**32510 CRYSTAL BREEZE LANE  
LEESBURG FL 34788  
US**

Mailing Address  
**32510 CRYSTAL BREEZE LANE  
LEESBURG FL 34788  
US**

2. Principal Place of Business

3. Mailing Address

**32506 Crystal Breeze Ln**

**32506 Crystal Breeze Ln.**

City & State  
**Leesburg, FL**  
Zip  
**34788** Country  
**US**

City & State  
**Leesburg, FL**  
Zip  
**34788** Country  
**US**

4. FEI Number  
**39-1017372**

Applied For  
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**SWIDERSKI, JOE JR  
32510 CRYSTAL BREEZE LANE  
LEESBURG FL 34788**

Name  
**Same**  
Street Address (P.O. Box Number is Not Acceptable)  
**32506 Crystal Breeze Ln.**  
City  
**Leesburg** FL Zip Code  
**34788**

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: **Joe Swiderski Jr., Pres.**  
Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

**4-10-03**  
DATE

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2003 Fee will be \$550.00**  
**Make Check Payable to Florida Department of State**

9. Election Campaign Financing  
Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**PD  
SWIDERSKI, JOE, JR.  
32510 CRYSTAL BREEZE LANE 32506  
LEESBURG, FL.,**

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**SD  
SWIDERSKI, JOAN  
32510 CRYSTAL BREEZE LANE 32506  
LEESBURG, FL.,**

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Change ☐ Addition

TITLE  
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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 607, 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: **Joe Swiderski Jr.**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**4-10-03 352-326-8981**  
Date Daytime Phone #

CR2E034 (10/02)