## 2007 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# F03000005431

**Entity Name: SWAN FINANCIAL CORPORATION** 

**FILED** Dec 21, 2007 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 

9500 WILLIAMSBURG PLAZA 320 WHITTINGTON PKWY. LOUISVILLE, KY 40222

STE. 304 LOUISVILLE, KY 40222

**Current Mailing Address: New Mailing Address:** 

9500 WILLIAMSBURG PLAZA 320 WHITTINGTON PKWY LOUISVILLE, KY 40222

STE. 304

LOUISVILLE, KY 40222 US

FEI Number: 03-0529199 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

NRAI SERVICES, INC 2731 EXECUTIVE PARK DRIVE SUITE 4

WESTON, FL 33331 US

INCORP SERVICES INC 17888 67TH COURT NORTH LOXAHATCHEE, FL 33470 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: DOUG PRATT ON BEHALF OF INCORP SERVICES 12/21/2007

> Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete Title: (X) Change ( ) Addition

SEXTON, THOMAS SEXTON, THOMAS Name: Name: 320 WHITTINGTON PKWY. STE. 304 9500 WILLAMSBURG PLAZA Address: Address:

City-St-Zip: LOUISVILLE, KY 40222 City-St-Zip: LOUISVILLE, KY 40222

( ) Delete Title: DVST Title: DVST (X) Change ( ) Addition

Name: RAQUE, DAVID Name: RACHE DAVID

9500 WILLIAMSBURG PLAZA Address: 320 WHITTINGTON PKWY. STE. 304 Address:

LOUISVILLE, KY 40222 City-St-Zip: LOUISVILLE, KY 40222 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: THOMAS E. SEXTON DP 12/21/2007