


**2008 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 24, 2008 08:00 AM
Secretary of State

DOCUMENT # G79591 1. Entity Name H. & S. SWANSONS' TOOL COMPANY	
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Principal Place of Business 9000-68TH ST., N. PINELLAS PARK, FL 33782 US	Mailing Address 9000-68TH ST., N. PINELLAS PARK, FL 34666 US
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DO NOT WRITE IN THIS SPACE



04212008 No Chg-P CR2E034 (11/05)

4. FEI Number 36-2248023	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

FISHER & SAULS, P.A.
100 2ND AVE., STE. 701, CITY CTR. BLDG.
ST PETERSBURG, FL 33701

**DO NOT WRITE
IN THIS SPACE**

B. 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 _____ (NOTE: Registered Agent signature required when reinstating)

**FILE NOW!!! FEE IS \$150.00
After May 1, 2008 Fee will be \$550.00**

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

DATE: 05/13/08-80114-022 150.00

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD SWANSON, JAMES H. ONE BEACH DR #2511 ST PETERSBURG, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SWANSON, JOSEPHINE ONE BEACH DR #2511 ST PETERSBURG, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST LAWTON, GEORGE 9000-68TH ST., N. ST. PETERSBURG, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: George Lawton
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date: 4/22/08 Daytime Phone #: 727.388.0704