## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# H81410

FILED Jan 09, 2009 Secretary of State

Entity Name: SOUTHWEST RETIREMENT HOME INC.

Current Principal Place of Business:			New Principal Place of Business:	
	. 42ND PLACE ILLE, FL 32608	3		
Current N	lailing Addres	s:	New Mailing Addre	ess:
	. 42ND PLACE ILLE, FL 32608	3		
FEI Number	: 59-2586605	FEI Number Applied For()	FEI Number Not Applicable ( )	Certificate of Status Desired ( )
Name and	d Address of C	urrent Registered Agent:	Name and Address	of New Registered Agent:
	IIFER . 42ND PLACE ILLE, FL 32607	' US		
	e named entity s e of Florida.	submits this statement for the p	ourpose of changing its register	red office or registered agent, or both,
in the Stati				
in the Stati SIGNATUI	RE:			
		ic Signature of Registered Ag	ent	Date
SIGNATU	Electron	ic Signature of Registered Aga Trust Fund Contribution ( ).	ent	Date
SIGNATUI	Electron	g Trust Fund Contribution ( ).		Date  GES TO OFFICERS AND DIRECTORS
SIGNATUI Election Cal OFFICER Title: Name: Address:	Electron	Trust Fund Contribution ( ).  TORS:  Delete  D PLACE		
SIGNATUI	Electron mpaign Financing S AND DIREC  P () GO, LICERIO T 3207 S.W. 42N GAINESVILLE,	TORS: Delete D PLACE FL 32608 Delete C D PLACE	ADDITIONS/CHANG Title: Name: Address:	GES TO OFFICERS AND DIRECTORS
Election Car OFFICER Title: Name: Address: City-St-Zip: Title: Name: Address:	Electron mpaign Financing S AND DIREC  P () GO, LICERIO T 3207 S.W. 42N GAINESVILLE,  VP () GO, JENNIFER 3207 S.W. 42N GAINESVILLE,	TORS: Delete D PLACE FL 32608 Delete C D PLACE FL 32608 Delete RELL C D PLACE	ADDITIONS/CHANG Title: Name: Address: City-St-Zip: Title: Name: Address:	GES TO OFFICERS AND DIRECTORS  ( ) Change ( ) Addition

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: JENNIFER GO VP 01/09/2009