

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# K80840

Entity Name: STEVEN W. CARSWELL ENTERPRISES, INC.

FILED  
Mar 20, 2009  
Secretary of State

**Current Principal Place of Business:**

P.O. BOX 14603  
NORTH PALM BEACH, FL 33408 US

**New Principal Place of Business:**

929 LAUREL RD.  
NORTH PALM BEACH, FL 33408 US

**Current Mailing Address:**

P.O. BOX 14603  
NORTH PALM BEACH, FL 33408 US

**New Mailing Address:**

FEI Number: 65-0123493      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

CARSWELL, STEVE  
929 LAUREL RD  
NORTH PALM BEACH, FL 33408 US

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

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:

Electronic Signature of Registered Agent

Date

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: DPS      ( ) Delete  
Name: CARSWELL, STEVEN W  
Address: 929 LAUREL RD  
City-St-Zip: NORTH PALM BEACH, FL 33408

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

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
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: CARSWELL STEVEN

DPS

03/20/2009

Electronic Signature of Signing Officer or Director

Date