

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# K90143

FILED  
Apr 19, 2011  
Secretary of State

**Entity Name:** SWANSEA PRODUCTIONS, INC.

**Current Principal Place of Business:**

2658 GORDON DR.  
NAPLES, FL 34102 US

**New Principal Place of Business:**

**Current Mailing Address:**

2658 GORDON DR.  
NAPLES, FL 34102 US

**New Mailing Address:**

**FEI Number:** 65-0156265

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

THOMAS, STELLA B.  
2658 GORDON DR.  
NAPLES, FL 33940 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

**OFFICERS AND DIRECTORS:**

Title: P  
Name: THOMAS, PETER A.  
Address: 2658 GORDON DR.  
City-St-Zip: NAPLES, FL 34102 US

Title: EA  
Name: THOMAS, STELLA B.  
Address: 2658 GORDON DR.  
City-St-Zip: NAPLES, FL 34102 US

Title: VP  
Name: THOMAS, PETER, JR.  
Address: 801 MOUNTAIN SHADOWS  
City-St-Zip: SEDONA, AZ 86336 US

Title: VP  
Name: THOMAS, DOUGLAS M.  
Address: 955 2ND AVENUE SOUTH  
City-St-Zip: NAPLES, FL 34102 US

Title: S/D  
Name: JOYOPRAYITNO, ELIZABETH  
Address: 241 10TH AVENUE SOUTH  
City-St-Zip: NAPLES, FL 34102 US

I hereby 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 all other like empowered.

SIGNATURE: PETER A. THOMAS

P

04/19/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date