


**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Aug 07, 2007 8:00 am
Secretary of State

08-07-2007 90028 017 ***550.00

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| DOCUMENT # K96451 1. Entity Name SOUTHWEST FLORIDA FRANCHISES, INC. |  |
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| Principal Place of Business 13132 PEREGRIN BRADENTON, FL 34212 US | Mailing Address 13132 PEREGRIN BRADENTON, FL 34212 US |
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DO NOT WRITE IN THIS SPACE



07052007 No Chg-P CR2E034 (11/05)

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|---|---------------------------------------|
| 4. FEI Number 65-0128802 | 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

RONE, RICHARD I.
13132 PEREGRIN
BRADENTON, FL 34212

DO NOT WRITE IN THIS SPACE

8. 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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

**FILE NOW!!! FEE IS \$550.00
Due by September 14, 2007**

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

10. OFFICERS AND DIRECTORS

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|--|--|
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | D RONE, RICHARD I. 13132 PEREGRIN BRADENTON, FL 34212 |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | D RONE, KATHERINE A. 13132 PEREGRIN BRADENTON, FL 34212 |
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| TITLE NAME STREET ADDRESS CITY-ST-ZIP | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | |

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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: *Richard Rone Pres. Rick Rone Pres* 7-507 941-2248920
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #