

# 2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L00000000391

Entity Name: SWIGAMES, LLC

FILED  
Apr 30, 2004  
Secretary of State

**Current Principal Place of Business:**

5000-16 NORWOOD AVENUE  
JACKSONVILLE, FL 32209

**New Principal Place of Business:**

**Current Mailing Address:**

5000-16 NORWOOD AVENUE  
JACKSONVILLE, FL 32209

**New Mailing Address:**

P.O. BOX 9467  
JACKSONVILLE, FL 32209

FEI Number: 59-3626365

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

DOZIER, WILENE  
2421 GRAND STREET  
JACKSONVILLE, FL 32208 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

**MANAGING MEMBERS/MEMBERS:**

Title: MGR ( ) Delete  
Name: DOZIER, WILENE C  
Address: 101 E. UNION ST. SUITE 303  
City-St-Zip: JACKSONVILLE, FL 32202 US

**ADDITIONS/CHANGES:**

Title: MGR (X) Change ( ) Addition  
Name: DOZIER, WILENE C  
Address: 2421 GRAND ST  
City-St-Zip: JACKSONVILLE, FL 32208 US

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: WILENE DOZIER

MGR

04/30/2004

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date