

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L01000010817

FILED
Apr 21, 2009
Secretary of State

Entity Name: SOUTHWEST FLORIDA WOMEN'S GROUP BUILDING COMPANY, L.L.C.

Current Principal Place of Business:

1890 SOUTHWEST HEALTH PKWY
303
NAPLES, FL 34109

New Principal Place of Business:

Current Mailing Address:

1890 SOUTHWEST HEALTH PKWY
303
NAPLES, FL 34109

New Mailing Address:

FEI Number: 59-3728841

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HUMPHREY, WENDY S
1890 SOUTHWEST HEALTH PKWY
303
NAPLES, FL 34109 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/MANAGERS:

Title: MGR () Delete
Name: HUMPHREY, WENDY MD
Address: 6553 RIDGEWOOD DR
City-St-Zip: NAPLES, FL 34108

Title: MGR () Delete
Name: BROTHERS, BETSY MD
Address: 478 HERON AVE
City-St-Zip: NAPLES, FL 34108

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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 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: WENDY HUMPHREY MD

MGR

04/21/2009

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