2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000061381

Entity Name: SWING LABS, LLC

FILED Apr 04, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

732 CABLE BEACH LANE NORTH PALM BEACH, FL 33410

Current Mailing Address: New Mailing Address:

P.O. BOX 31118 PALM BEACH GARDENS, FL 33420

FEI Number: 20-2647932 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

DIMARE, JOSEPH F

6 OYSTÉR BAY
NORTH PALM BEACH, FL 33408 US
2561 PEPPERWOOD CIRCLE S
NORTH PALM BEACH, FL 33410 US

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: 04/04/2007

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

Title: VPD () Delete Title: VPD (X) Change () Addition Name: DIMARE, JOSEPH F Name: DIMARE, JOSEPH F

Address: 6 OYSTER BAY Address: 2561 PEPPERWOOD CIRCLE S
City-St-Zip: NORTH PALM BEACH, FL 33408 City-St-Zip: NORTH PALM BEACH, FL 33410

City-St-Zip. NORTH FALM BEACH, LE 33400 City-St-Zip. NORTH FALM BEACH, LE 33410

Title: PSD () Delete Title: () Change () Addition Name: DIMARE, MARK G Name: Address: 732 CABLE BEACH LANE Address: Oity-St-Zip: NORTH PALM BEACH, FL 33410 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: JOSEPH F DIMARE VPD 04/04/2007