

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000000169

Entity Name: SWF CONSTRUCTION LLC

FILED
Apr 28, 2009
Secretary of State

Current Principal Place of Business:

28440 OLD US 41
BLDG 200 UNIT 10
BONITA SPRINGS, FL 34135

Current Mailing Address:

28440 OLD US 41
BLDG 200 UNIT 10
BONITA SPRINGS, FL 34135

New Principal Place of Business:

28440 OLD 41 RD
UNIT 11
BONITA SPRINGS, FL 34135

New Mailing Address:

28440 OLD 41 RD
UNIT 11
BONITA SPRINGS, FL 34135

FEI Number: 20-2136920

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KUEMMEL, OLAF
27061 EDENROCK CT
BONITA SPRINGS, FL 34135 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: P () Delete
Name: KUEMMEL, OLAF
Address: 27061 EDENROCK CT
City-St-Zip: BONITA SPRINGS, FL 34135

Title: V/P () Delete
Name: FELICE, ANTHONY L
Address: 2328 GREEN HERITAGE DR
City-St-Zip: NAPLES, FL 34119

ADDITIONS/CHANGES:

Title: P, D (X) Change () Addition
Name: KUEMMEL, OLAF
Address: 27061 EDENROCK CT
City-St-Zip: BONITA SPRINGS, FL 34135

Title: VP (X) Change () Addition
Name: FELICE, ANTHONY L
Address: 2328 GREEN HERITAGE DR
City-St-Zip: NAPLES, FL 34119

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: OLAF KUEMMEL

P

04/28/2009

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