

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L05000029788

Entity Name: SWFL PROPERTIES GROUP, LLC

**FILED**  
**Apr 18, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

131 HIBISCUS DRIVE  
PUNTA GORDA, FL 33950

**New Principal Place of Business:**

**Current Mailing Address:**

131 HIBISCUS DRIVE  
PUNTA GORDA, FL 33950

**New Mailing Address:**

131 HIBISCUS DRIVE  
PUNTA GORDA, FL 33950 US

FEI Number: 20-2537392

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

KLINE, GARY R  
131 HIBISCUS DRIVE  
PUNTA GORDA, FL 33950 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: MGRM  
Name: KLINE, GARY R  
Address: 131 HIBISCUS DR  
City-St-Zip: PUNTA GORDA, FL 33950 UN

Title: MGRM  
Name: COLLIER, CHRISTOPHER S  
Address: 1861 EASTBROOK RD.  
City-St-Zip: NEWCASTLE, PA 16101 UN

Title: MGRM  
Name: COLLIER, BYRON E  
Address: 5045 PINEY DAM RD.  
City-St-Zip: CLARION, PA 16214 UN

I hereby 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: GARY R KLINE

MGMR

04/18/2011

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