2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000114994

Address:

City-St-Zip:

11983 TAMIAMI TRIAL NORTH, SUITE 152

NAPLES, FL 34110

Entity Name: SW FLA INVESTMENTS, LLC.

FILED Apr 30, 2008 Secretary of State

Current Principal Place of Business:		New Principal Place	New Principal Place of Business:	
SUITE D	TH CONGRESS AVE I BEACH, FL 33426			
Current Mailing Address:		New Mailing Addres	New Mailing Address:	
SUITE D	TH CONGRESS AVE I BEACH, FL 33426			
FEI Number:	: 26-2512787 FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and	Address of Current Registered Agent:	Name and Address of	of New Registered Agent:	
SUITE D BOYNTON The above	IEFF TH CONGRESS AVE I BEACH, FL 33426 US named entity submits this statement for the of Florida.	ne purpose of changing its registere	d office or registered agent, or both	
SIGNATUR				
	Electronic Signature of Registered A	Agent	Date	
MANAGING MEMBERS/MANAGERS:		ADDITIONS/CHANGES:	ADDITIONS/CHANGES:	
Title: Name: Address: City-St-Zip:	MGRM () Delete BURDEN OF PROOF INVE, STMENTS, LLC. 3600 SOUTH CONGRESS AVE, SUITE G BOYNTON BEACH, FL 33426	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	MGRM () Delete STALEY, JEFF 3600 SOUTH CONGRESS AVE, SUITE D BOYNTON BEACH, FL 33426	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	MGRM () Delete LEE, DENNIS 3600 SOUTH CONGRESS AVE, SUITE D BOYNTON BEACH, FL 33426	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name:	MGRM () Delete ALL INCLUSIVE MANAGE, MENT, INC.	Title: Name:	() Change () Addition	

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.

Address:

City-St-Zip:

SIGNATURE: JEFF STALEY MGRM 04/30/2008