2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000005397

FILED Mar 21, 2006 Secretary of State

Entity Name: SOUTHWEST FLORIDA BANKRUPTCY PROFESSIONAL ASSOCIATION, INC.

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

3443 HANCOCK BRIDGE PKWY NORTH FORT MYERS, FL 339022800

Current Mailing Address: New Mailing Address:

PO BOX 61169 FORT MYERS, FL 33906

FEI Number: 27-0022501 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:

SZABO, DOUGLAS B 1715 MONROE STREET FORT MYERS, FL 33901 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:

Clastrania Circatura of Danistana d Anast

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

 Title:
 D
 () Delete
 Title:
 O
 (X) Change () Addition

 Name:
 BURNETT, PHILIP L
 Name:
 BURNETT, PHILIP L PRES.

 Address:
 2449 FIRST STREET
 Address:
 2449 FIRST STREET

 City-St-Zip:
 FT MYERS, FL 33901
 City-St-Zip:
 FT MYERS, FL 33901

Title: () Delete Title: (X) Change () Addition JOHNSTON, RICHARD SEC JENSEN, DIANE Name: Name: Address: 1833 HENDRY STREET Address: 2121 MCGREGOR BLVD. City-St-Zip: FT MYERS, FL 33901 City-St-Zip: FT MYERS, FL 33901

 Title:
 D
 () Delete
 Title:
 O
 (X) Change () Addition

 Name:
 SZABO, DOUGLAS B
 Name:
 CHAMPEAU, GREGORY A TRES

 Address:
 1715 MONROE STREET
 Address:
 2430 SHADOWLAWN DRIVE, SUITE 18

City-St-Zip: FT MYERS, FL 33901 City-St-Zip: NAPLES, FL 34112

Title: D (X) Delete Title: () Change () Addition

 Name:
 LEASURE, JEFFREY
 Name:

 Address:
 1342 COLONIAL BLVD
 Address:

 City-St-Zip:
 FT MYERS, FL 33907
 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 or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: GREGORY A. CHAMPEAU TRES 03/21/2006