

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000003760

FILED
Apr 30, 2009
Secretary of State

Entity Name: SOUTHWEST ESTATES HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

1286 US 90 WEST
LAKE CITY, FL 32055

New Principal Place of Business:

Current Mailing Address:

1286 US 90 WEST
LAKE CITY, FL 32055

New Mailing Address:

FEI Number: 20-2818513

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DICKS, BRADLEY N
1286 US 90 WEST
LAKE CITY, FL 32055 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

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: DICKS, BRADLEY N
Address: 1286 US HWY. 90 WEST
City-St-Zip: LAKE CITY, FL 32055

Title: SD () Delete
Name: ADAMS, SUZANNE D
Address: 1286 US HWY 90 WEST
City-St-Zip: LAKE CITY, FL 32055

Title: TD () Delete
Name: DICKS, LENVIL H
Address: 1286 US HWY 90 WEST
City-St-Zip: LAKE CITY, FL 32055

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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 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: BRADLEY N. DICKS

PD

04/30/2009

Electronic Signature of Signing Officer or Director

Date