

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000010056

FILED
Jan 06, 2005
Secretary of State

Entity Name: SOUTHWEST MCDONALD'S MARKETING ASSOCIATION, INC.

Current Principal Place of Business:

1023 5TH AVE. NORTH
NAPLES, FL 34102

New Principal Place of Business:

Current Mailing Address:

1023 5TH AVE. NORTH
NAPLES, FL 34102

New Mailing Address:

FEI Number: 20-0464079

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

O'REILLY, THOMAS F
1023 5TH AVE. NORTH
NAPLES, FL 34102 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: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD () Change (X) Addition
Name: LOVETT, RICK PRES
Address: 3656 PEACE RIVER
City-St-Zip: PUNTA GORDA, FL 33983 US

Title: VPD () Change (X) Addition
Name: FEWSTER, THOMAS G VP
Address: 11601 HAMPTONS GREEN DR
City-St-Zip: FORT MYERS, FL 33913 US

Title: T () Change (X) Addition
Name: O'REILLY, THOMAS F TREAS
Address: 2340 BROADWING CT
City-St-Zip: NAPLES, FL 34105 US

Title: SD () Change (X) Addition
Name: TREGUNO, DARLENE SEC
Address: 11869 GRAND ISLES LANE
City-St-Zip: FORT MYERS, FL 33913 US

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: THOMAS F O'REILLY

TREA

01/06/2005

Electronic Signature of Signing Officer or Director

Date