

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000010056

FILED  
Mar 01, 2012  
Secretary of State

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

**Current Principal Place of Business:**

1855 VETERANS PARK DR  
SUITE 203  
NAPLES, FL 34109

**New Principal Place of Business:**

**Current Mailing Address:**

1855 VETERANS PARK DR  
SUITE 203  
NAPLES, FL 34109

**New Mailing Address:**

**FEI Number:** 20-0464079

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

O'REILLY, THOMAS F  
1855 VETERANS PARK DR  
SUITE 206  
NAPLES, FL 34109 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  
Name: FREDERIC, TIM VP  
Address: 1715 DEL PRADO BLVD  
City-St-Zip: CAPE CORAL, FL 33990 US

Title: VPD  
Name: ADAMS, MICHAEL L PRES  
Address: 1855 VETERAN'S PARK DR SUITE 203  
City-St-Zip: NAPLES, FL 34109 US

Title: T  
Name: O'REILLY, THOMAS F  
Address: 2340 BROADWING CT  
City-St-Zip: NAPLES, FL 34105 US

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

I hereby 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 all other like empowered.

SIGNATURE: THOMAS F O'REILLY

TREA

03/01/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date