

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000011388

FILED
Jun 30, 2009
Secretary of State

Entity Name: SWF CHRISTIAN CHARITIES, INC.

Current Principal Place of Business:

12860 KENWOOD LANE
FORT MYERS, FL 33907

New Principal Place of Business:

Current Mailing Address:

12860 KENWOOD LANE
FORT MYERS, FL 33907

New Mailing Address:

FEI Number: 26-3944203 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

UNITED STATES CORPORATION AGENTS, INC.
13302 WINDING OAKS BLVD SUITE A-100
TAMPA, FL 33612 US

Name and Address of New Registered Agent:

CLAMORS, DOUGLAS E
12860 KENWOOD LANE
FORT MYERS, FL 33907 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: DOUGLAS E. CLAMORS

06/30/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: CLAMORS, SHELIA
Address: 4302 SW 19TH AVE
City-St-Zip: CAPE CORAL, FL 33914

Title: S () Delete
Name: SNYDER, JOSH
Address: 5821 VANCOUVER CIRCLE #2
City-St-Zip: FORT MYERS, FL 33907

Title: T () Delete
Name: CLAMORS, DOUGLAS
Address: 4302 SW 19TH AVE
City-St-Zip: CAPE CORAL, FL 33914

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: DOUGLAS E. CLAMORS

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06/30/2009

Electronic Signature of Signing Officer or Director

Date