

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N10000008714

FILED  
Mar 14, 2011  
Secretary of State

**Entity Name:** SWAY'S FOUNDATION INC

**Current Principal Place of Business:**

279 NW 106 TERR  
PEMBROKE PINES, FL 33026

**New Principal Place of Business:**

**Current Mailing Address:**

8362 PINES BLVD STE 167  
PEMBROKE PINES, FL 33024

**New Mailing Address:**

**FEI Number:** 27-3484086

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

CAMPBELL, CHARLENE T  
279 NW 106 TERR  
PEMBROKE PINES, FL 33026 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: PCEO  
Name: CAMPBELL, CHARLENE T  
Address: 279 NW 106 TERR  
City-St-Zip: PEMBROKE PINES, FL 33026

Title: VT  
Name: PEW, KENDRA  
Address: 9112 LIME TREE LANE  
City-St-Zip: PEMBROKE PINES, FL 33024

Title: S  
Name: RICCA, NICOLE A  
Address: 6734 SALTAIRE TER  
City-St-Zip: MARGATE, FL 33063

Title: SVP  
Name: THOMPSON, CLAUDETTE  
Address: 12154 ST. ANDREWS PL., UNIT 9 306  
City-St-Zip: MIRAMAR, FL 33025

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: CHARLENE T CAMPBELL

PCEO

03/14/2011

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

\_\_\_\_\_  
Date