## 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N17309

Entity Name: SAWCC, INC.

FILED Jan 11, 2007 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 

P.O. BOX 10102 2635 WEEKS AVENUE NAPLES, FL 34101 NAPLES, FL 34112 US

**Current Mailing Address: New Mailing Address:** 

P.O. BOX 10102

NAPLES, FL 34101 US

FEI Number: 59-2752895 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X)

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

FISHBANE, JONATHAN D ESQ. ROETZEL AND ANDRESS 850 PARK SHORE DRIVE NAPLES, FL 34103 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:

Date

Electronic Signature of Registered Agent

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

**PRES** () Delete (X) Change ( ) Addition

RULE, WILLIAM Name: JESSE, JAMES Name: 2170 48TH STREET SW Address: 1111 SPYGLASS LANE Address: City-St-Zip: NAPLES, FL 34116 City-St-Zip: NAPLES, FL 34102

Title: SECY () Delete Title: SECY (X) Change ( ) Addition

SEWELL, DINA Name: FITCH, JOYCE Name:

Address: 241 CARICA ROAD Address: 3033 RIVIERA DRIVE, SUITE 200

City-St-Zip: NAPLES, FL 34108 City-St-Zip: NAPLES, FL 34103

Title: () Delete Title: (X) Change ( ) Addition

JESSEE, JAMES SEWELL, DINA Name: Name: 1111 SPYGLASS LANE Address: Address: 241 CARICA ROAD City-St-Zip: NAPLES, FL 34102 City-St-Zip: NAPLES, FL 34108

( ) Delete Title: TREA Title: () Change () Addition

Name: SHUCKHART, ALMA Name: 3399 BINNACLE DRIVE Address: Address: NAPLES, FL 34108 City-St-Zip: City-St-Zip:

Title: CEO ( ) Delete Title: CEO (X) Change ( ) Addition

HERRMANN, KATHY Name: Name: CATINO, KATHY P. O. BOX 10102 Address: Address: P. O. BOX 10102 City-St-Zip: NAPLES, FL 34101 City-St-Zip: NAPLES, FL 34101

I hereby certify that the information supplied with this filing does not qualify for the 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: KATHY CATINO CEO 01/11/2007