

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N17309

Entity Name: SAWCC, INC.

FILED
Jan 16, 2009
Secretary of State

Current Principal Place of Business:

2635 WEEKS AVENUE
NAPLES, FL 34101 US

New Principal Place of Business:

2635 WEEKS AVENUE
NAPLES, FL 34112 US

Current Mailing Address:

P.O. BOX 10102
NAPLES, FL 34101 US

New Mailing Address:

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

Name and Address of Current Registered Agent:

FISHBANE, JONATHAN D ESQ.
ROETZEL AND ADDRESS
850 PARK SHORE DRIVE
NAPLES, FL 34103 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: PRES () Delete
Name: JESSE, JAMES
Address: 1111 SPYGLASS LANE
City-St-Zip: NAPLES, FL 34102

Title: SECY () Delete
Name: FITCH, JOYCE
Address: 3033 RIVIERA DRIVE, SUITE 200
City-St-Zip: NAPLES, FL 34103

Title: VP () Delete
Name: JINX, LIGGETT
Address: 27160 BAY LANDING DR.
City-St-Zip: BONITA SPRINGS, FL 34135

Title: TREA () Delete
Name: SHUCKHART, ALMA
Address: 3399 BINNACLE DRIVE
City-St-Zip: NAPLES, FL 34108

Title: ED () Delete
Name: OBERHAUS, LINDA
Address: P. O. BOX 10102
City-St-Zip: NAPLES, FL 34101

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change () Addition
Name: LIGGETT, JINX
Address: 27160 BAY LANDING DRIVE
City-St-Zip: BONITA SPRINGS, FL 34135

Title: SECY (X) Change () Addition
Name: WEINMAN, JOYCE
Address: 14621 BELLINO TERRACE, #201
City-St-Zip: BONITA SPRINGS, FL 34135

Title: VP (X) Change () Addition
Name: SCHAEDEL, PETER
Address: 274 EDGEMERE WAY EAST
City-St-Zip: NAPLES, FL 34105

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: LINDA OBERHAUS

ED

01/16/2009

Electronic Signature of Signing Officer or Director

Date