2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000086082

Entity Name: ARCON OF SOUTHWEST FLORIDA, INC.

FILED Jan 05, 2012 Secretary of State

Current Principal Place of Business:	New Principal Place of Business

1515 SE 47TH STREET US CAPE CORAL, FL 33904

Current Mailing Address: New Mailing Address:

27850 LEATHERWOOD CIRCLE PUNTA GORDA, FL 33950

FEI Number: 30-0131338 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

WOTITZKY, EDWARD L 223 TAYLOR ST. PUNTA GORDA, FL 33950

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:

US

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title:

STOUT, JO DONNA I Name:

27850 LEATHERWOOD CIRCLE Address: City-St-Zip: PUNTA GORDA, FL 33950 US

Title:

Name: STOUT, ROLAND V

27850 LEATHERWOOD CIRCLE Address: City-St-Zip: PUNTA GORDA, FL 33950 US

Title: SD

STOUT, JO DONNA I Name:

27850 LEATHERWOOD CIRCLE Address: City-St-Zip: PUNTA GORDA, FL 33950 US

Title: VD

STOUT, JO DONNA I Name:

Address: 27850 LEATHERWOOD CIRCLE City-St-Zip: PUNTA GORDA, FL 33950 US

Title:

Name: STOUT, JO DONNA I

Address: 27850 LEATHERWOOD CIRCLE City-St-Zip: PUNTA GORDA, FL 33950 US

Title:

Name: HACKETT, CATHY L 5232 S.W. 19TH AVENUE Address: City-St-Zip: CAPE CORAL, FL 33914

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 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: JO DONNA I. STOUT PD 01/05/2012