


**2005 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**May 02, 2005 08:00 AM**  
**Secretary of State**

|   |   |
|---|---|
| <b>DOCUMENT # P00000096277</b><br>1. Entity Name<br>SW NATO, INC. |  |
|---|---|

|   |   |
|---|---|
| Principal Place of Business<br>2015 SOUTH TUTTLE AVENUE<br>SARASOTA, FL 34239 | Mailing Address<br>PO BOX 1418<br>SARASOTA, FL 34230-1418 |
|---|---|

**DO NOT WRITE IN THIS SPACE**



04282005 No Chg-P CR2E034 (10/03)

|   |                                       |
|---|---------------------------------------|
| 4. FEI Number<br>59-0805005                               | Applied For<br>Not Applicable         |
| 5. Certificate of Status Desired <input type="checkbox"/> | <b>\$8.75</b> Additional Fee Required |

**5. Name and Address of Current Registered Agent**

FRIEDLAND, RALPH L ESQ  
2033 MAIN STREET SUITE 100  
SARASOTA, FL 34237

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IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE \_\_\_\_\_

Signature typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reissuing)

DATE \_\_\_\_\_

**FILE NOW!!! FEE IS \$150.00  
After May 1, 2005 Fee will be \$550.00**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

**10. OFFICERS AND DIRECTORS**

|  |   |
|--|---|
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | PD<br>PATTON, WARD H JR<br>100 SANDY HOOK<br>SARASOTA, FL 34242           |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | VD<br>SEGER, CHRISTOPHER E<br>3336 PLANTATION DRIVE<br>SARASOTA, FL 34231 |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | S<br>GIBSON, ANDREA<br>6993 COUNTRY LAKE CIRCLE<br>SARASOTA, FL 34243     |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP |   |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP |   |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP |   |

1000000356867  
05/04/05-80048-024 150.00

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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

**SIGNATURE:** Andrea Gibson Andrea Gibson

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/28/05 (941) 365-1119

Date

Daytime Phone #