

2005 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P01000020162

Entity Name: SWS OF FORT MYERS, INC.

FILED
Nov 06, 2005
Secretary of State

Current Principal Place of Business:

16000 CHAMBERLIN PKWY
SUITE 8679
FORT MYERS, FL 33913

Current Mailing Address:

16000 CHAMBERLIN PKWY
SUITE 8679
FORT MYERS, FL 33913

New Principal Place of Business:

11000 TERMINAL ACCESS RD
SUITE 8679
FORT MYERS, FL 33913

New Mailing Address:

11000 TERMINAL ACCESS RD
SUITE 8679
FORT MYERS, FL 33913

FEI Number: 65-1079641

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NICHOLS, JAMES L
8191 COLLEGE PARKWAY
SUITE 204
FORT MYERS, FL 33919 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: JAMES L NICHOLS

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: DOOLEY, JAMES S
Address: 8320 TRENTWOOD COURT
City-St-Zip: FORT MYERS, FL 33912

Title: D () Delete
Name: SURETTE, WILLIAM N
Address: 14540 SUMMERLIN TRACE COURT #1
City-St-Zip: FORT MYERS, FL 33919

Title: D (X) Delete
Name: SURETTE, WILLIAM H
Address: 1735 BRANTLEY ROAD # 1510
City-St-Zip: FORT MYERS, FL 33907

Title: D (X) Delete
Name: JANSON, GEORGE W
Address: 9969 MAR LARGO CIRCLE
City-St-Zip: FORT MYERS, FL 33919

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: SURETTE, WILLIAM N
Address: 12613 SECOND ST
City-St-Zip: FORT MYERS, FL 33905

Title: D (X) Change () Addition
Name: SURETTE, WILLIAM H
Address: 14540 SUMMERLIN TRACE COURT #1
City-St-Zip: FORT MYERS, FL 33919

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 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 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 an address, with all other like empowered.

SIGNATURE: WILLIAM N SURETTE

D

11/06/2005

Electronic Signature of Signing Officer or Director

Date