

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000107266

FILED
Jan 13, 2009
Secretary of State

Entity Name: SOUTHWEST CONSTRUCTION SERVICES, INC.

Current Principal Place of Business:

212 WALLACE AVE.
LEHIGH ACRES, FL 33971

New Principal Place of Business:

Current Mailing Address:

212 WALLACE AVE.
LEHIGH ACRES, FL 33971

New Mailing Address:

FEI Number: 65-1149602

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WHITE, JOHN P
3431 PINE RIDGE ROAD
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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PSD () Delete
Name: CURCIO, JOHN
Address: 8581 GLENLYON CT
City-St-Zip: FORT MYERS, FL 33912

Title: VP () Delete
Name: GRIFFIN, MARK
Address: 17800 FRANK RD.
City-St-Zip: ALVA, FL 33920

Title: VP () Delete
Name: BAUER, JEFF
Address: 15530 PEPPERTREE CT.
City-St-Zip: NORTH FORT MYERS, FL 33917

Title: S/T () Delete
Name: SABISTON, JULIE
Address: 6970 BUCKINGHAM RD.
City-St-Zip: FT. MYERS, FL 33905

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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

SIGNATURE: JOHN CURCIO

PSD

01/13/2009

Electronic Signature of Signing Officer or Director

_____ Date