

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000024194

FILED
Mar 23, 2009
Secretary of State

Entity Name: SWANSON AND SONS AUTOMOTIVE, INC.

Current Principal Place of Business:

2850 WORTH AVE
ENGLEWOOD, FL 34224

New Principal Place of Business:

Current Mailing Address:

2850 WORTH AVE
ENGLEWOOD, FL 34224

New Mailing Address:

FEI Number: 03-0396781

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SWANSON, ERIC
1051 OLIVE AVE
ENGLEWOOD, FL 34223 US

Name and Address of New Registered Agent:

SWANSON, SHELLY
1051 OLIVE AVE
ENGLEWOOD, FL 34223 US

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: SHELLY SWANSON

03/23/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: SWANSON, ERIC
Address: 1051 OLIVE AVE
City-St-Zip: ENGLEWOOD, FL 34223

Title: V () Delete
Name: SWANSON, SHELLEY
Address: 1051 OLIVE AVE
City-St-Zip: ENGLEWOOD, FL 34223

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: SHELLY SWANSON

V

03/23/2009

Electronic Signature of Signing Officer or Director

Date