

**2008 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Apr 24, 2008 08:00 AM**  
**Secretary of State**

**DOCUMENT # P02000055599**

1. Entity Name  
**SELECT BUILDERS OF SOUTHWEST FLORIDA INC.**



Principal Place of Business  
**14618 21ST AVE EAST  
BRADENTON, FL 34212**

Mailing Address  
**14618 21ST AVE EAST  
BRADENTON, FL 34212**



02272008 No Chg-P CR2E034 (11/05)

4. FEI Number  
**82-0546243**

Applied For  
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional  
Fee Required**

**DO NOT WRITE IN THIS SPACE**

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

**CAVALLARO, PAMELA S  
14618 21ST AVE EAST  
BRADENTON, FL 34212**

**DO NOT WRITE  
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 reinstating)

DATE \_\_\_\_\_

**FILE NOW!!! FEE IS \$150.00  
After May 1, 2008 Fee will be \$550.00**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

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

**U000000919042  
05/13/08-80106-011 150.00**

**10. OFFICERS AND DIRECTORS**

TITLE	P
NAME	CAVALLARO, PAMELA
STREET ADDRESS	14618 21ST AVE EAST
CITY-ST-ZIP	BRADENTON, FL 34212
TITLE	VP
NAME	CAVALLARO, ANTHONY
STREET ADDRESS	14618 21ST AVE EAST
CITY-ST-ZIP	BRADENTON, FL 34212
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

**DO NOT WRITE  
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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:** *Pamela Cavallaro* **Pam Cavallaro, P.S.**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**2-27-08**

Date

**941-552-4179**

Daytime Phone #