

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000061981

FILED
Feb 02, 2005
Secretary of State

Entity Name: SWF BUSINESS ENTERPRISES, INC.

Current Principal Place of Business:

839 MIRAMAR ST
CAPE CORAL, FL

New Principal Place of Business:

944 COUNTRY CLUB BLVD
SUITE 207
CAPE CORAL, FL 33990

Current Mailing Address:

839 MIRAMAR ST
CAPE CORAL, FL

New Mailing Address:

944 COUNTRY CLUB BLVD
SUITE 207
CAPE CORAL, FL 33990

FEI Number: 02-0622048

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WILLIAMS, CHARLES
839 MIRAMAR ST
CAPE CORAL, FL US

Name and Address of New Registered Agent:

WILLIAMS, CHARLES
944 COUNTRY CLUB BLVD
SUITE 207
CAPE CORAL, FL 33990 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: CHARLES WILLIAMS

02/02/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: WILLIAMS, CHARLES
Address: 839 MIRAMAR ST
City-St-Zip: CAPE CORAL, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: WILLIAMS, CHARLES
Address: 944 COUNTRY CLUB BLVD
City-St-Zip: CAPE CORAL, FL 33990

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: CHARLES WILLIAMS

D

02/02/2005

Electronic Signature of Signing Officer or Director

Date