

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000068139

FILED
Apr 02, 2004
Secretary of State

Entity Name: SERVICES OF S.W. FLORIDA, INC.

Current Principal Place of Business:

7350 S. TAMIAMI TRAIL, # 294
SARASOTA, FL 34231

New Principal Place of Business:

5235 EARLY TER
PT. CHARLOTTE, FL 33981

Current Mailing Address:

PO BOX 27034
EL JOBEAN, FL 33927

New Mailing Address:

FEI Number: 04-3691862 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MCCARREN, NANCY
1843 CARIBBEAN DRIVE
SARASOTA, FL 34231 US

Name and Address of New Registered Agent:

MCCARREN, NANCY
5235 EARLY TER
PT. CHARLOTTE, FL 33981 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: _____

Electronic Signature of Registered Agent

04/02/2004

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P,VP () Delete
Name: MCCARREN, NANCY L
Address: 7350 S. TAMIAMI TRAIL, # 294
City-St-Zip: SARASOTA, FL 34231

Title: P,VP () Delete
Name: MCCARREN, NANCY L
Address: 7350 S. TAMIAMI TRAIL, # 294
City-St-Zip: SARASOTA, FL 34231

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P,VP (X) Change () Addition
Name: MCCARREN, NANCY L
Address: 5235 EARLY TER
City-St-Zip: PT. CHARLOTTE, FL 33981

Title: P,VP (X) Change () Addition
Name: MCCARREN, NANCY L
Address: 5235 EARLY TER
City-St-Zip: PT. CHARLOTTE, FL 33981

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: NANCY L. MCCARREN

Electronic Signature of Signing Officer or Director

P.

04/02/2004

Date