## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000020031

Entity Name: ART WORKS OF S.W. FLORIDA, INC.

FILED Feb 16, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

1416 LAFAYETTE ST, STE 2 2714 SW 28TH PLACE CAPE CORAL, FL 33904 US CAPE CORAL, FL 33914

Current Mailing Address: New Mailing Address:

1416 LAFAYETTE ST, STE 2 CAPE CORAL, FL 33904 US 2714 SW 28TH PLACE CAPE CORAL, FL 33914 US

FEI Number: 56-2332803 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

COPENHAVER, STEPHANIE KIESLING, STEPHANIE L
1416 LAFAYETTE ST, STE 2 2714 SW 28TH PLACE
CAPE CORAL, FL 33904 US CAPE CORAL, FL 33914 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: STEPHANIE KIESLING 02/16/2009

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

Title: P () Delete
Name: MORRISON, KELLY

Address: 3310 SW 2ND LANE
City-St-Zip: CAPE CORAL, FL 33991 US

Title: V () Delete
Name: COPENHAVER, STEPHANIE
Address: 2714 SW 28TH PLACE
City-St-Zip: CAPE CORAL, FL 33914 US

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

US

Title: P (X) Change ( ) Addition

Name: MORRISON, KELLY
Address: 3012 NW 7TH TERRACE
City-St-Zip: CAPE CORAL, FL 33993 US

Title: VP (X) Change () Addition

 Name:
 KIESLING, STEPHANIE

 Address:
 2714 SW 28TH PLACE

 City-St-Zip:
 CAPE CORAL, FL 33914 US

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: STEPHANIE KIESLING VP 02/16/2009