

# 2006 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P03000028802

Entity Name: SMW OF SW FLORIDA, INC.

FILED  
Apr 04, 2006  
Secretary of State

## Current Principal Place of Business:

2211 ANDREA LANE  
SUITE 100  
FORT MYERS, FL 33912

## New Principal Place of Business:

17520 DEVORE LN  
FORT MYERS, FL 33913

## Current Mailing Address:

2211 ANDREA LANE  
SUITE 100  
FORT MYERS, FL 33912

## New Mailing Address:

20301 GRANDE OAKS BLVD  
#118, PMB 29  
ESTERO, FL 33928

FEI Number: 56-2324864

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

WILLIAMS, SHAWN M  
2211 ANDREA LANE  
SUITE 100  
FORT MYERS, FL 33912 US

## Name and Address of New Registered Agent:

WILLIAMS, SHAWN M  
17520 DEVORE LN  
FORT MYERS, FL 33913 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: SHAWN M. WILLIAMS

04/04/2006

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PST ( ) Delete  
Name: WILLIAMS, SHAWN M  
Address: 2211 ANDREA LN, STE 100  
City-St-Zip: FORT MYERS, FL 33912 US

Title: D ( ) Delete  
Name: WILLIAMS, SHAWN M  
Address: 2211 ANDREA LN, STE 100  
City-St-Zip: FORT MYERS, FL 33905 US

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PST (X) Change ( ) Addition  
Name: WILLIAMS, SHAWN M  
Address: 17520 DEVORE LN  
City-St-Zip: FORT MYERS, FL 33913 US

Title: D (X) Change ( ) Addition  
Name: WILLIAMS, SHAWN M  
Address: 17520 DEVORE LN  
City-St-Zip: FORT MYERS, FL 33913 US

I hereby certify that the information supplied with this filing does not qualify for the 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: SHAWN M. WILLIAMS

P

04/04/2006

Electronic Signature of Signing Officer or Director

Date