

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000057829

Entity Name: SWFLAFAIRWAYS, INC.

FILED  
Mar 21, 2005  
Secretary of State

## Current Principal Place of Business:

5514 SW 12 AVE  
CAPE CORAL, FL 33914

## New Principal Place of Business:

## Current Mailing Address:

5514 SW 12 AVE  
CAPE CORAL, FL 33914

## New Mailing Address:

FEI Number: 56-2457185

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

NIEVES, NELSON  
5514 SW 12 AVE  
CAPE CORAL, FL 33914 US

## Name and Address of New Registered Agent:

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

\_\_\_\_\_  
Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: DP ( ) Delete  
Name: NIEVES, VERNE  
Address: 5514 SW 12 AVE  
City-St-Zip: CAPE CORAL, FL 33914 US

Title: DST ( ) Delete  
Name: NIEVES, NELSON C  
Address: 5514 SW 12 AVE  
City-St-Zip: CAPE CORAL, FL 33914 US

Title: DTO (X) Delete  
Name: PRIMUS, JERMAINE A  
Address: 884 BRIARWOOD BLVD  
City-St-Zip: NAPLES, FL 34104 US

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: NELSON C NIEVES

DST

03/21/2005

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date