


2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 10, 2006 8:00 am
Secretary of State

02-10-2006 90011 004 ***150.00

DOCUMENT # P03000074549

1. Entity Name
SWANDER INVESTMENTS, INC.



Principal Place of Business Mailing Address
815 W HAMPSHIRE BLVD **815 W HAMPSHIRE BLVD**
CITRUS SPRINGS, FL 34434 **CITRUS SPRINGS, FL 34434**

20006923



2. Principal Place of Business 3. Mailing Address
 Suite, Apt. #, etc. Suite, Apt. #, etc.

02042006 Chg-P CR2E034 (11/05)

City & State City & State

4. FEI Number Applied For
20-0096590 Not Applicable

Zip Country Zip Country

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent
BONDORFF, CARL
4001 W PINTO LOOP
BEVERLY HILLS, FL 34465
4022 N Ringwood Circle
Hernando FL 34442

7. Name and Address of New Registered Agent
 Name
 Street Address (P.O. Box Number is Not Acceptable)
 City **FL** Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.
 SIGNATURE: *Carl Bondorff* - Treasurer DATE: *2/9/06*

FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution. **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE	PE	<input type="checkbox"/> Delete
NAME	SWANDER, ROBERTA	
STREET ADDRESS	2191 W LABONTE CIRCLE	
CITY-ST-ZIP	BEVERLY HILLS, FL 34465	
TITLE	V	<input type="checkbox"/> Delete
NAME	SWANDER, ALLEN SCOTT	
STREET ADDRESS	2191 W LABONTE CIRCLE	
CITY-ST-ZIP	BEVERLY HILLS, FL 34465	
TITLE	S	<input type="checkbox"/> Delete
NAME	BONDORFF, ELIZABETH	
STREET ADDRESS	4002 W PINTO LOOP	
CITY-ST-ZIP	BEVERLY HILLS, FL 34465	
TITLE	T	<input type="checkbox"/> Delete
NAME	BONDORFF, CARL	
STREET ADDRESS	4002 W PINTO LOOP	
CITY-ST-ZIP	BEVERLY HILLS, FL 34465	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS	<i>4022 N Ringwood Circle</i>	
CITY-ST-ZIP	<i>Hernando FL 34442</i>	
TITLE		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS	<i>4022 N Ringwood Circle</i>	
CITY-ST-ZIP	<i>Hernando FL 34442</i>	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Carl Bondorff* *Carl Bondorff* DATE: *2/9/06* DAYTIME PHONE #: *352-637-4097*