2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000074549

Title:

Name:

Address:

City-St-Zip:

FILED Feb 09, 2009 Secretary of State

Entity Nam	ne: SWANDER	R INVESTMENTS, INC.		•	
Current Principal Place of Business:			New Principal Place of	New Principal Place of Business:	
815 W HAMPSHIRE BLVD CITRUS SPRINGS, FL 34434					
Current Mailing Address:			New Mailing Address:	New Mailing Address:	
815 W HAMPSHIRE BLVD CITRUS SPRINGS, FL 34434					
FEI Number:	20-0096590	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:			Name and Address of N	Name and Address of New Registered Agent:	
BANDORFF, CARL 4022 N RINGWOOD CIR HERNANDO, FL 34442 US			BONDORFF, CARL 4022 N RINGWOOD CIR HERNANDO, FL 34442	4022 N RINGWOOD CIR	
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: CARL BONDORFF				02/09/2009	
Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution ().					
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGES	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	PE () D SWANDER, ROB 2191 W LABONTI BEVERLY HILLS,	E CIRCLE	Title: () Name: Address: City-St-Zip:	Change () Addition	
Title: Name: Address: City-St-Zip:	V () D SWANDER, ALLE 2191 W LABONTI BEVERLY HILLS,	E CIRCLE	Title: () Name: Address: City-St-Zip:	Change () Addition	
Title: Name: Address: City-St-Zip:	S () D BONDORFF, ELIZ 4022 N RINGWOO HERNANDO, FL	OD CIR	Title: () Name: Address: City-St-Zip:	Change () Addition	

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.

Title:

Name:

Address:

City-St-Zip:

SIGNATURE: CARL BONDORFF TRES 02/09/2009

() Delete

BONDORFF, CARL

4022 N RINGWOOD CIR

HERNANDO, FL 34442

() Change () Addition