2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 07, 2006
Secretary of State

DOCUMENT# P03000145631

Entity Name: SOUTHWEST FLORIDA COMMUNITY INSURANCE, INC.

Current Principal Place of Business:

5831 HALIFAX AVENUE
FORT MYERS, FL 33912

New Principal Place of Business:

Current Mailing Address:

5831 HALIFAX AVENUE
FORT MYERS, FL 33912

New Mailing Address:

FEI Number: 54-2135012 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CARLINO, MICHAEL L
214 SE 13TH AVE
CAPE CORAL, FL 33990 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: D ( ) Delete
Name: CARLINO, MICHAEL L
Address: 214 SE 13TH AVE
City-St-Zip: CAPE CORAL, FL 33990

Title: D (X) Delete
Name: HASS, PATRICIA G
Address: 2039 SE 15TH STREET
City-St-Zip: CAPE CORAL, FL 33990

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition
Name: CARLINO, MICHAEL L
Address: 7831 REFLECTION COVE DR. #101
City-St-Zip: FORT MYERS, FL 33907

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 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: MICHAEL CARLINO PRES 03/07/2006

Electronic Signature of Signing Officer or Director Date