

# 2005 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P03000151172

Entity Name: M C OF SOUTHWEST FLORIDA, INC.

FILED  
May 18, 2005  
Secretary of State

## Current Principal Place of Business:

4567 ORANGE TREE CT  
FT MYERS, FL 33905

## New Principal Place of Business:

2420 CONCORDE DR  
UNIT 10  
FORT MYERS, FL 33901

## Current Mailing Address:

4567 ORANGE TREE CT  
FT MYERS, FL 33905

## New Mailing Address:

FEI Number: 59-2677912      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

CREMASCO, MELISSA  
4567 ORANGE TREE CT  
FT MYERS, FL 33905      US

## Name and Address of New Registered Agent:

CREMASCO, MELISSA PD  
4567 ORANGE TREE CT  
FT MYERS, FL 33905      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: MELISSA CREMASCO

05/18/2005

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: CREMASCO, MELISSA  
Address: 4567 ORANGE TREE CT  
City-St-Zip: FT MYERS, FL 33905

Title: VP ( ) Delete  
Name: CHARLES, DANIEL  
Address: 347 STATE STREET  
City-St-Zip: FORT MYERS, FL 33903

Title: SEC ( ) Delete  
Name: BENDOLA, LAURIE A  
Address: 15612 SUNNY CREST LN  
City-St-Zip: FORT MYERS, FL 33912

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change ( ) Addition  
Name: CREMASCO, MELISSA  
Address: 4567 ORANGE TREE CT  
City-St-Zip: FT MYERS, FL 33905

Title: V (X) Change ( ) Addition  
Name: CHARLES, DANIEL  
Address: 347 STATE STREET  
City-St-Zip: FORT MYERS, FL 33903

Title: S (X) Change ( ) Addition  
Name: BENDOLA, LAURIE A  
Address: 15612 SUNNY CREST LN  
City-St-Zip: FORT MYERS, FL 33912

Title: T ( ) Change (X) Addition  
Name: BARBARIA, KEVIN T  
Address: 4567 ORANGE TREE CT  
City-St-Zip: FORT MYERS, FL 33905

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: MELISSA CREMASCO

PD

05/18/2005

Electronic Signature of Signing Officer or Director

Date