## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P03000151172

Entity Name: M C OF SOUTHWEST FLORIDA, INC.

FILED Jan 23, 2006 Secretary of State

Current Principal Place of Business:			New Principal Place of Business:			
2420 CON	ICORDE DR					
UNIT 10 FORT MY	ERS, FL 3390°	1				
	lailing Addres		New Mailing Address:			
	NGE TREE CT	-				
FIMYER	S, FL 33905					
FEI Number: 58-2677912 FEI Number Applied For ( )			FEI Number Not Appl	FEI Number Not Applicable ( ) Certificate of Status Desired ( )		
Name and	l Address of C	urrent Registered Agent:	Name and	Name and Address of New Registered Agent:		
4567 ORA	CO, MELISSA NGE TREE CT S, FL 33905					
	e named entity s e of Florida.	submits this statement for the p	ourpose of changing i	ts registered	office or registered agent, or both,	
SIGNATUI	RE:					
	Electron	ic Signature of Registered Age	ent	Date		
Election Ca	mpaign Financing	Trust Fund Contribution ( ).				
OFFICERS AND DIRECTORS:			ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	DP () CREMASCO, M 4567 ORANGE FT MYERS, FL	TREE CT	Title: Name: Address: City-St-Zip:	(	) Change ()Addition	
Title: Name: Address: City-St-Zip:	V () CHARLES, DAN 347 STATE STE FORT MYERS,	REET	Title: Name: Address: City-St-Zip:	V () BENDOLA, LA 15612 SUNNY FORT MYERS	CREST LN	
Title: Name: Address: City-St-Zip:	S () BENDOLA, LAU 15612 SUNNY ( FORT MYERS,	CREST LN	Title: Name: Address: City-St-Zip:	(	) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	T () BARBARIA, KE' 4567 ORANGE FORT MYERS,	TREE CT	Title: Name: Address: City-St-Zip:	(	) Change ( ) Addition	

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: LAURIE BENDOLA VP 01/23/2006