2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 31, 2007
Secretary of State

DOCUMENT# P03000151172

Entity Name: M C OF SOUTHWEST FLORIDA, INC.

Current Principal Place of Business:

2420 CONCORDE DR
UNIT 10
FORT MYERS, FL 33901

New Principal Place of Business:

Current Mailing Address:

4567 ORANGE TREE CT
FT MYERS, FL 33905

New Mailing Address:

2420 CONCORDE DR
UNIT 10
FT MYERS, FL 33901

FEI Number: 58-2677912 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

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

Title: V ( ) Delete
Name: BENDOLA, LAURIE A
Address: 15612 SUNNY CREST LN
City-St-Zip: FORT MYERS, FL 33905

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

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

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: MELISSA CREMASCO DP 01/31/2007

Electronic Signature of Signing Officer or Director Date