

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000060454

Entity Name: SWIFT RECOVERY, INC.

FILED  
Mar 19, 2006  
Secretary of State

## Current Principal Place of Business:

1848 NW 97TH AVE  
FT LAUDERDALE, FL 33322

## New Principal Place of Business:

9031 TROPICAL BEND CIRCLE  
JACKSONVILLE, FL 32256

## Current Mailing Address:

1848 NW 97TH AVE  
FT LAUDERDALE, FL 33322

## New Mailing Address:

9031 TROPICAL BEND CIRCLE  
JACKSONVILLE, FL 32256

FEI Number: 20-1022525

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

STUART M. ROTMAN, C.P.A., P.A.  
4700 N STATE RD 7  
SUITE 208  
FT LAUDERDALE, FL 33319 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: PS ( ) Delete  
Name: SWIFT, BRUCE I  
Address: 1848 NW 97TH AVE  
City-St-Zip: FT LAUDERDALE, FL 33322

Title: VT ( ) Delete  
Name: SWIFT, GAIL  
Address: 1848 NW 97TH AVE  
City-St-Zip: FT LAUDERDALE, FL 33322

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PS (X) Change ( ) Addition  
Name: SWIFT, BRUCE I  
Address: 9031 TROPICAL BEND CIRCLE  
City-St-Zip: JACKSONVILLE, FL 32256

Title: VT (X) Change ( ) Addition  
Name: SWIFT, GAIL  
Address: 9031 TROPICAL BEND CIRCLE  
City-St-Zip: JACKSONVILLE, FL 32256

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: BRUCE I. SWIFT

P

03/19/2006

Electronic Signature of Signing Officer or Director

Date