# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**
**Mar 27, 2009**
**Secretary of State**

DOCUMENT# P04000133817

**Entity Name:** SOUTHWEST FLORIDA MARINE INDUSTRIES ASSOCIATION, INC.

**Current Principal Place of Business:**

1314 B NORTH TAMIAMI TRAIL
NORTH FORT MYERS, FL 33903 US

**New Principal Place of Business:**

**Current Mailing Address:**

P O BOX 1510
FORT MYERS, FL 33902 US

**New Mailing Address:**

**FEI Number: 59-1520450** **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

STEAD, KEN
1314 B NORTH TAMIAMI TRAIL
NORTH FORT MYERS, FL 33903 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: P ( ) Delete
Name: TOM, HANSEN
Address: 4809 TAMIAMI TRAIL
City-St-Zip: CHARLOTTE HARBOR, FL 33980 US

Title: SECR ( ) Delete
Name: MILLER, VIVIAN
Address: 17771 N. TAMIAMI TRAIL
City-St-Zip: NORTH FORT MYERS, FL 33903 US

Title: VP ( ) Delete
Name: WILSON, HANS
Address: 1938 HILL AVE
City-St-Zip: FORT MYERS, FL 33901 US

Title: T ( ) Delete
Name: CHASE, MARK
Address: 16991 SR 31
City-St-Zip: FORT MYERS, FL 33905 US

**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 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: TOM HANSEN P 03/27/2009

Electronic Signature of Signing Officer or Director Date