## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P04000162886

Entity Name: SW FLORIDA SUBS #2, INC.

**FILED** Apr 20, 2006 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 

14700 TAMIAMI TRL N UNIT # 10 FIREHOUSE SUBS NAPLES, FL 34110

**New Mailing Address: Current Mailing Address:** 

460 GOLFVIEW DRIVE NAPLES, FL 34110

FEI Number: 71-0974327 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

BRYANT, ROBERT C BRYANT, ROBERT C 460 GOLFVIEW DRIVE 460 GOLFVIEW DRIVE NAPLES, FL 34110 NAPLES, FL 34110

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: ROBERT C. BRYANT 04/20/2006

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

ATLANTA, GA 30309

Name: Address:

City-St-Zip:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: (X) Change ( ) Addition ( ) Delete Title: BRYANT, ROBERT C. BRYANT, ROBERT C Name: Name: 460 GOLFVIEW DRIVE 460 GOLFVIEW DRIVE Address: Address: NAPLES, FL 34110 City-St-Zip: NAPLES, FL 34110 City-St-Zip:

DS Title: DS Title: ( ) Delete (X) Change ( ) Addition

Name: BRYANT, LYNNE M. Name: BRYANT, LYNNE M

8751 WESLEY AN DRIVE, APT. 1811 8751 WESLEY AN DRIVE, APT. 1811 Address: Address:

FORT MYERS, FL 33919 FORT MYERS, FL 33919 City-St-Zip: City-St-Zip:

Title: Title: (X) Change ( ) Addition DVP ( ) Delete DVP BRYANT, SAMUEL P. III BRYANT, SAMUEL P III Name: Name:

8751 WESLEY AN DRIVE, APT. 1811 8751 WESLEY AN DRIVE, APT. 1811 Address: Address:

City-St-Zip: FORT MYERS, FL 33919 City-St-Zip: FORT MYERS, FL 33919

Title: DT ( ) Delete Title: () Change () Addition PORGES, JAMES W

Name: 1636 FRIARTUCK RD 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: ROBERT C. BRYANT PD 04/20/2006