## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P04000162886

Entity Name: SW FLORIDA SUBS #2, INC.

FILED Apr 24, 2007 Secretary of State

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

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

Current Mailing Address: New Mailing Address:

460 GOLFVIEW DRIVE 63 GLASGOW DR NAPLES, FL 34110 PINEHURST, NC 28374

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
460 GOLFVIEW DRIVE
NAPLES, FL 34110 US
BRYANT, ROBERT C
14700 TAMIAMI TRAIL N
UNIT 10- FIREHOUSE SUBS
NAPLES, FL 34110 US

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: 04/24/2007

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP ( ) Delete Title: DP (X) Change ( ) Addition Name: BRYANT, ROBERT C PRYANT, ROBERT C

 Address:
 460 GOLFVIEW DRIVE
 Address:
 63 GLASGOW DR

 City-St-Zip:
 NAPLES, FL 34110
 City-St-Zip:
 PINEHURST, NC 28374

Title: DS ( ) Delete Title: DS (X) Change ( ) Addition Name: BRYANT, LYNNE M Name: BRYANT, LYNNE M

Address: 8751 WESLEY AN DRIVE, APT. 1811 Address: 9243 FABLE ST
City-St-Zip: FORT MYERS, FL 33919 City-St-Zip: ORLANDO, FL 32817

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

 Name:
 BRYANT, SAMUEL P III
 Name:
 BRYANT, SAMUEL P III

 Address:
 8751 WESLEY AN DRIVE, APT. 1811
 Address:
 9243 FABLE ST

 City-St-Zip:
 FORT MYERS, FL 33919
 City-St-Zip:
 ORLANDO, FL 32817

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

 Name:
 PORGES, JAMES W
 Name:
 PORGES, JAMES W

 Address:
 1636 FRIARTUCK RD
 Address:
 1636 FRIAR TUCK RD

 City-St-Zip:
 ATLANTA, GA 30309
 City-St-Zip:
 ATLANTA, GA 30309

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 04/24/2007