## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P05000023657

Name:

Address:

City-St-Zip:

MASSIE, CHARLES B.

1420 SE 47TH STREET

CAPE CORAL, FL 33904

Entity Name: SW FLORIDA PROPERTY MAINTENANCE, INC.

FILED Feb 11, 2008 Secretary of State

Current Principal Place of Business:			New Principal Pla	New Principal Place of Business:	
4519 SE 16TH PL UNIT 111 CAPE CORAL, FL 33904			UNIT 1-2-3	1625 SE 47TH TERR UNIT 1-2-3 CAPE CORAL, FL 33904	
Current Mailing Address:			New Mailing Add	New Mailing Address:	
4519 SE 16TH PL UNIT 111 CAPE CORAL, FL 33904			1625 SE 47TH TERR UNIT 1-2-3 CAPE CORAL, FL 33904		
FEI Number:	: 20-2430328	FEI Number Applied For ( )	FEI Number Not Applicable ( )	Certificate of Status Desired ( )	
Name and Address of Current Registered Agent:			Name and Addres	Name and Address of New Registered Agent:	
CAPE COI	7TH STREET RAL, FL 3390		purpose of changing its regist	ered office or registered agent, or both,	
SIGNATUR	RE:				
Election Car		nic Signature of Registered Ag g Trust Fund Contribution().	ent	Date	
OFFICERS AND DIRECTORS:			ADDITIONS/CHAI	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS	
Title: Name: Address: City-St-Zip:	DS ( ESKIN, HAROI 1420 SE 47TH CAPE CORAL	STREET	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	DP ( CRAMER, LISA 1625 SE 47TH CAPE CORAL	TERR	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title:	DT (	) Delete	Title:	( ) Change ( ) Addition	

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.

Name:

Address:

City-St-Zip:

SIGNATURE: LISA CRAMER DP 02/11/2008