## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P05000046845

Entity Manner IDM OF THE COUTH MEET INC

FILED Apr 15, 2009 Secretary of State

Enuty Name: JRM OF THE SOUTH WEST, INC.			
Current Principal Place of Business:	New Principal Place of Business:		
460 S. INDIANA AVENUE ENGLEWOOD, FL 34223			
Current Mailing Address:	New Mailing Address	<b>3:</b>	
460 S. INDIANA AVENUE ENGLEWOOD, FL 34223			
FEI Number: 73-1735330 FEI Number Applied For ( )	FEI Number Not Applicable ( )	Certificate of Status Desired ( )	
Name and Address of Current Registered Agent:	Name and Address o	Name and Address of New Registered Agent:	
DICKINSON, ROBERT A 460 SOUTH INDIANA AVENUE ENGLEWOOD, FL 34223 US			
The above named entity submits this statement for the poin the State of Florida.	urpose of changing its registered	d office or registered agent, or both,	
SIGNATURE:			
Electronic Signature of Registered Age	nt	Date	
Election Campaign Financing Trust Fund Contribution ( ).			
OFFICERS AND DIRECTORS:	ADDITIONS/CHANGE	ES TO OFFICERS AND DIRECTOR	

Title: Title: ( ) Delete (X) Change ( ) Addition BRYSON, JEANETTE BRYSON, JEANETTE Name: Name: 612 BRISTOL LANE P.O. BOX 995 Address: Address: City-St-Zip: NOKOMIS, FL 34274 City-St-Zip: NOKOMIS, FL 34275 Title: () Delete Title: (X) Change ( ) Addition TOLBERT, JAN TOLBERT, JAN Name: Name: Address: 66657 CONRAD RD Address: 960 OXFORD ST. EDWARDSBURG, MI 49112 HAMILTON, OH 45013 City-St-Zip: City-St-Zip:

Title: Title: VS ( ) Delete VS (X) Change ( ) Addition Name: COOK, BARBARA Name: COOK, BARBARA Address: 1131 HERIZON RD Address: 1131 HORIZON RD. City-St-Zip: VENICE, FL 34293 City-St-Zip: VENICE, FL 34293

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: JAN MARIE TOLBERT PT 04/15/2009