

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000049724

Entity Name: SWIFT MANAGEMENT, INC.

FILED
Apr 12, 2006
Secretary of State

Current Principal Place of Business:

1704 KELLEY AVE
KISSIMMEE, FL 34745

New Principal Place of Business:

813 NEW YORK AVE.
ST. CLOUD, FL 34769

Current Mailing Address:

1704 KELLEY AVE
KISSIMMEE, FL 34745

New Mailing Address:

813 NEW YORK AVE.
ST. CLOUD, FL 34769

FEI Number: 59-3803190

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

LOUDIN, NELLIE
1704 KELLEY AVE
KISSIMMEE, FL 34745 US

Name and Address of New Registered Agent:

LOUDIN, NELLIE
1019 OHIO AVE.
ST. CLOUD, FL 34769 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: NELLIE LOUDIN

04/12/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: LOUDIN, NELLIE
Address: 1704 KELLEY AVE
City-St-Zip: KISSIMMEE, FL 34745

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: LOUDIN, NELLIE
Address: 1019 OHIO AVE.
City-St-Zip: ST. CLOUD, FL 34769

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: NELLIE LOUDIN

P

04/12/2006

Electronic Signature of Signing Officer or Director

Date