

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P05000096960

Entity Name: ESW SERVICES, INC.

**FILED**  
**Apr 30, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

305 WHEELER STREET  
DELEON SPRINGS, FL 32130

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 189  
DELEON SPRINGS, FL 32130

**New Mailing Address:**

FEI Number: 20-3131745

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

WILSON, JOHN E  
305 WHEELER STREET  
DELEON SPRINGS, FL 32130 US

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

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:

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: D  
Name: WILSON, JOHN E  
Address: 305 WHEELER STREET  
City-St-Zip: DELEON SPRINGS, FL 32130

Title: O  
Name: WILSON, DIANE S  
Address: 305 WHEELER STREET  
City-St-Zip: DELEON SPRINGS, FL 32130

I hereby 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 all other like empowered.

SIGNATURE: JOHN E. WILSON

D

04/30/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date