

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P05000106138

**Entity Name:** SWIFT DISTRIBUTION, INC.

**FILED**  
**Mar 11, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

3332 SOUTHSIDE BLVD.  
JACKSONVILLE, FL 32216 US

**New Principal Place of Business:**

**Current Mailing Address:**

3332 SOUTHSIDE BLVD.  
JACKSONVILLE, FL 32216 US

**New Mailing Address:**

**FEI Number:** 20-3231092

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

BAJALIA, MICHAEL M ESQ.  
501 RIVERSIDE AVE., 7TH FLOOR  
JACKSONVILLE, FL 32202 US

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

JAN, LAPPAN  
4545 ARROW WIND LANE  
JACKSONVILLE, FL 32258 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: JAN LAPPAN

03/11/2011

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: DP  
Name: HASSAN, SALEM F  
Address: 3332 SOUTHSIDE BLVD.  
City-St-Zip: JACKSONVILLE, FL 32216 US

Title: DST  
Name: GOODWIN, TRACY A  
Address: 3332 SOUTHSIDE BLVD.  
City-St-Zip: JACKSONVILLE, FL 32216

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: SALEM HASSAN

DP

03/11/2011

Electronic Signature of Signing Officer or Director

Date