

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000131211

FILED
Mar 24, 2009
Secretary of State

Entity Name: SWEDE AM SERVICES INCORPORATED

Current Principal Place of Business:

6649 LAKE EMMA RD.
GROVELAND, FL 34736

New Principal Place of Business:

Current Mailing Address:

6649 LAKE EMMA RD.
GROVELAND, FL 34736

New Mailing Address:

FEI Number: 54-2184934 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PERONI, GLENN
6649 LAKE EMMA RD.
GROVELAND, FL 34736 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: PERONI, ULRIKA
Address: 6649 LAKE EMMA RD.
City-St-Zip: GROVELAND, FL 34736

Title: V () Delete
Name: PERONI, GLENN
Address: 6649 LAKE EMMA RD.
City-St-Zip: GROVELAND, FL 34736

Title: T () Delete
Name: RADDATZ, JANICE
Address: 1310 WESTMORELAND RD.
City-St-Zip: CLEVELAND, GA 30528

Title: S () Delete
Name: JORDAN, MARK
Address: 1116 LINMAR AVE.
City-St-Zip: FRUTILAND PARK, FL 34731

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: GLENN PERONI

V

03/24/2009

Electronic Signature of Signing Officer or Director

_____ Date