

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000140521

FILED
Feb 11, 2009
Secretary of State

Entity Name: SOUTHWEST FLORIDA ASSOCIATES, INC.

Current Principal Place of Business:

7422 S. TAMIAMI TRAIL
SARASOTA, FL 34241

New Principal Place of Business:

412 S. TAMIAMI TRAIL
SARASOTA, FL 34229

Current Mailing Address:

P. O. BOX 5668
SARASOTA, FL 34277

New Mailing Address:

FEI Number: 20-3705450

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KNOWLES, CHARLES
4034 ROBERTS PT ROAD
SARASOTA, FL 34242 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: PD () Delete
Name: KNOWLES, CHARLES
Address: P. O. BOX 5668
City-St-Zip: SARASOTA, FL 34277

Title: TDS () Delete
Name: GUENTNER, BRIAN
Address: P. O. BOX 5668
City-St-Zip: SARASOTA, FL 34277

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: TDS (X) Change () Addition
Name: GUENTNER, BRYAN
Address: P. O. BOX 5668
City-St-Zip: SARASOTA, FL 34277

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: CHARLES KNOWLES

PRES

02/11/2009

Electronic Signature of Signing Officer or Director

_____ Date