

# **2010 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

DOCUMENT# P06000057352

**FILED**  
**Apr 14, 2010**  
**Secretary of State**

**Entity Name:** WHILE YOU'RE AWAY OF SW FLORIDA, INC.

**Current Principal Place of Business:**

851 19TH STREET SW  
NAPLES, FL 34117 US

**New Principal Place of Business:**

230 3RD STREET NW  
NAPLES, FL 34120 US

**Current Mailing Address:**

851 19TH STREET SW  
NAPLES, FL 34117 US

**New Mailing Address:**

230 3RD STREET NW  
NAPLES, FL 34120 US

**FEI Number:** 90-0535037

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

BARTON, SCOTT A  
851 19TH STREET SW  
NAPLES, FL 34117 US

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

LANGFORD, DONNA M  
230 3RD STREET NW  
NAPLES, FL 34120 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: DONNA :LANGFORD

04/14/2010

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PVPS  
Name: LANGFORD, DONNA M  
Address: 230 3RD STREET NW  
City-St-Zip: NAPLES, FL 34120

Title: T  
Name: LANGFORD, DONNA M  
Address: 230 3RD STREET NW  
City-St-Zip: NAPLES, FL 34120

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: DONNA LANGFORD

PRE

04/14/2010

Electronic Signature of Signing Officer or Director

Date