2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Aug 10, 2009
Secretary of State

DOCUMENT# P06000069363

Entity Name: SCHWABLAND ENTERPRISES, INC.

Current Principal Place of Business:

2124 COUNTRY LOOP S
LAKELAND, FL 33811

New Principal Place of Business:

906 SPRING LAKE SQUARE
WINTER HAVEN, FL 33881

Current Mailing Address:

2124 COUNTRY LOOP S
LAKELAND, FL 33811

New Mailing Address:

906 SPRING LAKE SQUARE
WINTER HAVEN, FL 33881

FEI Number: 86-1168286 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

SCHWABLAND, WARD L
2124 COUNTRY LOOP S
LAKELAND, FL 33811 US

Name and Address of New Registered Agent:

SCHWABLAND, WARD L
906 SPRING LAKE SQUARE
WINTER HAVEN, FL 33881 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: 08/10/2009
Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: DVT ( ) Delete
Name: SCHWABLAND, WARD L
Address: 2124 COUNTRY LOOP S
City-St-Zip: LAKELAND, FL 33811

Title: DP ( ) Delete
Name: SCHWABLAND, TERRI L
Address: 2124 COUNTRY LOOP S
City-St-Zip: LAKELAND, FL 33811

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DVT (X) Change ( ) Addition
Name: SCHWABLAND, WARD L
Address: 906 SPRING LAKE SQUARE
City-St-Zip: WINTER HAVEN, FL 33881

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: WARD L. SCHWABLAND DVT 08/10/2009
Electronic Signature of Signing Officer or Director Date