2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000086059

City-St-Zip:

N FT MYERS, FL 33918

Entity Name: TWI OF SOUTH FLORIDA, INC.

FILED Mar 22, 2009 Secretary of State

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Current Principal Place of Business:			New Principal Place of Business:		
	AMIAMI TRAIL ORDA, FL 33:				
Current Mailing Address:			New Mailing Address:		
PO BOX 4 N FT MYE	357 RS, FL 33918	3			
FEI Number	: 20-5200018	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:			Name and Address o	Name and Address of New Registered Agent:	
17200 N T), MICHAEL AMIAMI TRAIL ORDA, FL 33:				
	named entity e of Florida.	submits this statement for the	purpose of changing its registered	d office or registered agent, or both,	
SIGNATU	RE:				
Electronic Signature of Registered Agent			gent	Date	
Election Car	mpaign Financin	g Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	PST (GATTUSO, MIC PO BOX 4357 N FT MYERS,		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	V (STIGER, TODI PO BOX 4357 N FT MYERS,		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address:	V (COHEN, ETHA PO BOX 4357		Title: Name: Address:	() Change () Addition	

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.

City-St-Zip:

SIGNATURE: MICHAEL GATTUSO PST 03/22/2009