

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000108737

Entity Name: KARLA SWARTZ, LMT, INC.

FILED
Feb 11, 2009
Secretary of State

Current Principal Place of Business:

505 BARTOW ROAD
LAKELAND, FL 33801

New Principal Place of Business:

15000 CITRUS COUNTRY DRIVE
SUITE #207
DADE CITY, FL 33523

Current Mailing Address:

PO BOX 92193
LAKELAND, FL 33804

New Mailing Address:

FEI Number: 22-3941672 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

SPIEGEL & UTRERA, P.A.
1840 SW 22ND ST.
4TH FLOOR
MIAMI, FL 33145 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: DP () Delete
Name: SWARTZ, KARLA
Address: 505 BARTOW ROAD
City-St-Zip: LAKELAND, FL 33801

Title: V () Delete
Name: SWARTZ, MICHAEL
Address: 505 BARTOW ROAD
City-St-Zip: LAKELAND, FL 33801

Title: ST () Delete
Name: SWARTZ, AARON
Address: 505 BARTOW ROAD
City-St-Zip: LAKELAND, FL 33801

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change () Addition
Name: SWARTZ, KARLA
Address: 15000 CITRUS COUNTRY DR., SUITE #207
City-St-Zip: DADE CITY, FL 33523

Title: V (X) Change () Addition
Name: SWARTZ, MICHAEL
Address: 15000 CITRUS COUNTRY DR., SUITE #207
City-St-Zip: DADE CITY, FL 33523

Title: ST (X) Change () Addition
Name: SWARTZ, AARON
Address: 15000 CITRUS COUNTRY DR., SUITE #207
City-St-Zip: DADE CITY, FL 33523

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: KARLA SWARTZ

DP

02/11/2009

Electronic Signature of Signing Officer or Director

Date