

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000141905

FILED
Apr 26, 2007
Secretary of State

Entity Name: SOUTHWEST FLORIDA FUNDING IV, INC.

Current Principal Place of Business:

15122 SUMMIT PLACE CIRCLE
NAPLES, FL 34119

New Principal Place of Business:

Current Mailing Address:

15122 SUMMIT PLACE CIRCLE
NAPLES, FL 34119

New Mailing Address:

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

Name and Address of Current Registered Agent:

E.H.G. RESIDENT AGENTS, INC.
5100 TOWN CENTER CIRCLE SUITE 430
BOCA RATON, FL 33486 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: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P () Change (X) Addition
Name: DAVENPORT, RICHARD
Address: 11860 W STATE RD 84 STE B15
City-St-Zip: DAVIE, FL 33330

Title: VPS () Change (X) Addition
Name: GOLAN, AMNON
Address: 11860 W STATE RD 84, STE B15
City-St-Zip: DAVIE, FL 33330

Title: VP () Change (X) Addition
Name: SELIGMAN, BRIAN
Address: 15122 SUMMIT PLACE CR
City-St-Zip: NAPLES, FL 34119

Title: VP () Change (X) Addition
Name: MILLER, ROBERT
Address: 3350 BRIDLE PATH LANE
City-St-Zip: WESTON, FL 33331

I hereby certify that the information supplied with this filing does not qualify for the 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: RICHARD DAVENPORT

P

04/26/2007

Electronic Signature of Signing Officer or Director

_____ Date