

2007 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P06000145408

FILED
Jul 30, 2007
Secretary of State

Entity Name: SW FL AFFORDABLE FINANCING, INC.

Current Principal Place of Business:

3849 NW 43RD AVE
CAPE CORAL, FL 33993

New Principal Place of Business:

1407 VISCAYA PARKWAY
SUITE 4
CAPE CORAL, FL 33990

Current Mailing Address:

3849 NW 43RD AVE
CAPE CORAL, FL 33993

New Mailing Address:

FEI Number: 20-5936710

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PITTMAN, LARY
6051 ESTERO BLVD
FT MYERS BEACH, FL 33931 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

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: KOSS, ROBERT L
Address: 3849 NW 43RD AVE
City-St-Zip: CAPE CORAL, FL 33993

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,D (X) Change () Addition
Name: KOSS, ROBERT L
Address: 3849 NW 43RD AVE
City-St-Zip: CAPE CORAL, FL 33993

Title: VP () Change (X) Addition
Name: LEAVITT, DAWN
Address: 3849 NW 43RD AVENUE
City-St-Zip: CAPE CORAL, FL 33993

Title: S () Change (X) Addition
Name: LEAVITT, DAWN
Address: 3849 NW 43RD AVENUE
City-St-Zip: CAPE CORAL, FL 33993

Title: T () Change (X) Addition
Name: LEAVITT, DAWN
Address: 3849 NW 43RD AVENUE
City-St-Zip: CAPE CORAL, FL 33993

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: DAWN LEAVITT

VP

07/30/2007

Electronic Signature of Signing Officer or Director

Date