## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P06000155952

FILED Jan 18, 2008 Secretary of State

Entity Name: MEMBERSHIP DIRECTORS ASSOCIATION OF SOUTHWEST FLORIDA, INC.

Current Principal Place of Business:			New Principal Pla	New Principal Place of Business:	
4606 WEST BAY BLVD ESTERO, FL 33928			13300 VALEWOOD DRIVE NAPLES, FL 34119		
Current Mailing Address:			New Mailing Add	New Mailing Address:	
4606 WEST BAY BLVD ESTERO, FL 33928			13300 VALEWOOD DR. NAPLES, FL 34119		
FEI Number	: 30-0396001	FEI Number Applied For ( )	FEI Number Not Applicable (	) Certificate of Status Desired ( )	
Name and	d Address of	Current Registered Agent:	Name and Addres	ss of New Registered Agent:	
ROYAL PA 1979 N CO	R, RONALD S ALM MALL LLIER BLVD SLAND, FL 34				
The above		submits this statement for the p	ourpose of changing its regist	tered office or registered agent, or both	
n the Stat	o or r rorrad.				
n the Stat	RE:	nic Signature of Registered Age	ent	Date	
n the Stat SIGNATU	RE: Electro	nic Signature of Registered Age	ent	Date	
n the Stat SIGNATU Election Ca	RE: Electro	ng Trust Fund Contribution ( ).		Date  NGES TO OFFICERS AND DIRECTO	
n the Stat SIGNATU	RE: Electro mpaign Financir S AND DIREC	ong Trust Fund Contribution ( ).  CTORS:  ) Delete N S RD			
n the Stat BIGNATU Election Ca DFFICER Fitle: Name: Address:	RE: Electro mpaign Financir S AND DIRECT P ( BILSON, JOAN 7737 GROVES NAPLES, FL 3	ng Trust Fund Contribution ( ).  CTORS:  ) Delete N S RD 34109  ) Delete ELODY RD	ADDITIONS/CHA Title: Name: Address:	NGES TO OFFICERS AND DIRECTO	
n the Stat BIGNATU Election Ca DFFICER Title: Name: Address: City-St-Zip: Title: Name: Address:	RE: Electro mpaign Financir S AND DIREC P (BILSON, JOAN 7737 GROVES NAPLES, FL 3 VP (KAPPAUF, ME 500 NASSAU I MARCO ISLAN	ng Trust Fund Contribution ( ).  CTORS:  ) Delete N	ADDITIONS/CHA  Title: Name: Address: City-St-Zip:  Title: Name: Address:	NGES TO OFFICERS AND DIRECTO  ( ) 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.

SIGNATURE: MELODY A. KAPPAUF VP 01/18/2008