

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000078484

FILED  
Apr 05, 2011  
Secretary of State

**Entity Name:** CHOICES IN LIVING SWF INC

**Current Principal Place of Business:**

3812 SKYLINE BOULEVARD  
CAPE CORAL, FL 33914 US

**New Principal Place of Business:**

**Current Mailing Address:**

3812 SKYLINE BOULEVARD  
CAPE CORAL, FL 33914 US

**New Mailing Address:**

FEI Number: 26-3246229

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

GATTURNA, FRANCIS  
3812 SKYLINE BOULEVARD  
CAPE CORAL, FL 33914 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  
Name: GATTURNA, FRANCIS  
Address: 3812 SKYLINE BOULEVARD  
City-St-Zip: CAPE CORAL, FL 33914 US

Title: VP  
Name: GATTURNA, ELIZABETH  
Address: 3812 SKYLINE BOULEVARD  
City-St-Zip: CAPE CORAL, FL 33914 US

I hereby 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 all other like empowered.

SIGNATURE: FRANCIS GATTURNA

PRES

04/05/2011

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date