

2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P10000021883

FILED
Apr 25, 2012
Secretary of State

Entity Name: VAN SWOL MANAGEMENT GROUP, INC.

Current Principal Place of Business:

C/O JOEL FRIEND AND ASSOCIATES, INC.
2863 EXECUTIVE PARK DRIVE #105
WESTON, FL 33331 US

New Principal Place of Business:

Current Mailing Address:

C/O JOEL FRIEND AND ASSOCIATES, INC.
2863 EXECUTIVE PARK DRIVE #105
WESTON, FL 33331 US

New Mailing Address:

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

Name and Address of Current Registered Agent:

JOEL FRIEND AND ASSOCIATES, INC.
2863 EXECUTIVE PARK DRIVE
SUITE 105
WESTON, FL 33331 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: VAN SWOL, PETRONELLA
Address: 2863 EXECUTIVE PARK DRIVE, STE. 105
City-St-Zip: WESTON, FL 33331 US

Title: VP
Name: VAN SWOL, LAURENS
Address: 2863 EXECUTIVE PARK DRIVE, STE. 105
City-St-Zip: WESTON, FL 33331 US

Title: T
Name: VAN SWOL, CORNELIS
Address: 2863 EXECUTIVE PARK DRIVE, STE. 105
City-St-Zip: WESTON, FL 33331 US

Title: S
Name: VAN SWOL, MADELEINE
Address: 2863 EXECUTIVE PARK DRIVE, STE. 105
City-St-Zip: WESTON, FL 33331 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: PETRONELLA VAN SWOL

P

04/25/2012

_____ Electronic Signature of Signing Officer or Director

_____ Date