

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P94000064831

Entity Name: SWAINE & HARRIS, P.A.

**FILED**  
**Jan 11, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

425 S. COMMERCE AVE.  
SEBRING, FL 33870

**New Principal Place of Business:**

**Current Mailing Address:**

425 S. COMMERCE AVE.  
SEBRING, FL 33870

**New Mailing Address:**

FEI Number: 65-0515722

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

SWAINE, ROBERT S  
425 S. COMMERCE AVE.  
SEBRING, FL 33870 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: D  
Name: SWAINE, J. MICHAEL  
Address: 425 S. COMMERCE AVE.  
City-St-Zip: SEBRING, FL

Title: DP  
Name: HARRIS, BERT J III  
Address: 401 DAL HALL BLVD  
City-St-Zip: LAKE PLACID, FL 33852

Title: DVST  
Name: SWAINE, ROBERT S  
Address: 425 S. COMMERCE AVE.  
City-St-Zip: SEBRING, FL 33870

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: J MICHAEL SWAINE

D

01/11/2011

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

\_\_\_\_\_  
Date