## FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS** 

1997 DOCUMENT # P95000041463 (7)

SAFETY SUPPLIED BY SWAN, INC.

**FILED** May 07 1997 8:00am Secretary of State

Principal Place of Business Mailing Address 300 SO. DUNCAN AVENUE STE 236 CLEARWATER FL 34615 CLEARWATER FL 34615-8412										
							<ol> <li>Date Incorporated or Qualified 05/26/1995</li> </ol>		ate of Last R 101/1996	teport
r	lace of Business		ng Address				4. FEI Number		<del></del>	pplied For
Suite, Apt	# ote	26 Suite	, Apt. #, etc.				59-33 18 129			ot Applicable Additional
22	π, ειο.	<del></del> -	27				5. Certificate of Status Desired			Additional leguired
City & State	e		& State	<u> </u>		······································	6. Election Campaign Financing		\$5.00	May Be
23		28					Trust Fund Contribution			to Fees
Zφ	Country Zip			Country			8. This corporation has liability for intangible tax under s. 199.032,			
24	25 Same and Address of Curre	29	30			<del></del>	Florida Statutes Yes You No. 10. Name and Address of New Registered Agent			
	g, Name and Address of Curre	III negistered	Maiir		61	Name	10, Name and Address of New He	Augrated	wāeur	
	AN, DAVID S JR.	^				INGSTRO				
300 SO. DUNCAN AVENUE STE 238 CLEARWATER FL 34615					82	Street Add	ess (P.O. Box Number is Not Acceptable)			
	MINIMIEN FL 34010				83				<del></del>	
					84	C+-			Test 7:-	0-4-
					100	City		FL	85 Zip	Code
11, Pursuant office or r agent La SIGNATURE	to the provisions of Sections 607.050 egistered agent, or both, in the State im familiar with, and accept the oblig	02 and 607.150 c of Florida. Su pations of, Sect	08, Florida Statut ich change was i tion 607,0505, Fl	tes, the a authorize orida Sta	bove id by tutes	e-named con the corpora s.	rporation submits this statement for the pation's board of directors. I hereby acception	urpose o of the app	f changing i pointment as	ts registered registered
SIGNATIONE	Signature, typed or printed name of registered ag				d Age	nt signature requ	ulrad when reinstaling)	DATE		
12.	OFFICERS AN	ID DIRECTORS		13.		<del></del>	ADDITIONS/CHANGES TO OFFIC	ERS AND		
TILLE	D DAVAN DAVAD O 10		DELETE	1,1 T		1			Change	Addition
NAME Capera Absorces	SWAN, DAVID \$ JR. 300 SO. DUNCAN AVENUE \$	TE 928		1.2 N	_	IDDD500				
STREET ADORESS CITY-ST-ZIE	CLEARWATER FL 34615	IL ESO		1		ADDRESS				
THUE	OLLANIA LLITE OTO IS		DELETE	2.1 T	ITY-S ITLE	1-211			Change	Addition
NAME				22 N		İ				
STREET ADDRESS						ADDRESS				
CITY-ST ZIP						915 - TE	1.			
TULF			DELETE	3.1 T				<del></del>	Change	Addition
NAME				3.2 N	AME	1				
STREET ACORESS				3.3 5	TREET	address .				
Clay-S1-ZiP				3.4. (	CITY-S	ST-ZIP				
TITLE			☐ DELETE	4.1 T					Change	Addition
NAME				1	NAME	1				
STREET ADDRESS						ADDRESS				
CITY - ST - ZIP			☐ DELETE		ITY-S	T-ZIP			Change	Addition
TIPLE TABLE			M DECEME	5.1 T					CT CHANGE	L. Addition
NAME SUBTET ADDRESS				5.2 N		ADDDECC				
						ADDRESS				
CITY-ST ZIF			☐ DELETE	5.4 C	ITLE	1-217			Change	Addition
NAME			terms or other terms	6.2 N						
STREET ADDRESS				1		ADDRESS				
CITY - ST - ZIP					ATY-S	1				
011131171		at a first at the first		0.4 (	m11-5	it zir	dia notice denotativa ficial prava	. 16 -1	176 11	

I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.