

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000007527

FILED
Apr 22, 2008
Secretary of State

Entity Name: SWOPE, LAMBERSON & CHARBONNEAU PLANNING GROUP, INC.

Current Principal Place of Business:

8955 FONTANA DEL SOLWAY
NAPLES, FL 34109

New Principal Place of Business:

Current Mailing Address:

PO BOX 111419
NAPLES, FL 34108

New Mailing Address:

FEI Number: 65-0892565

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LAMBERSON, JANE E
8955 FONTANA DEL SOL WAY
NAPLES, FL 34109 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DPV () Delete
Name: SWOPE, RICHARD L
Address: 8955 FONTANA DEL SOL WAY
City-St-Zip: NAPLES, FL 34109

Title: DST () Delete
Name: LAMBERSON, JANE E
Address: 8955 FONTANA DEL SOL WAY
City-St-Zip: NAPLES, FL 34109

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: JANE E LAMBERSON

DST

04/22/2008

Electronic Signature of Signing Officer or Director

Date