

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000049870

FILED  
Apr 20, 2006  
Secretary of State

Entity Name: A AMERICAN BAIL BONDS OF SOUTHWEST FLORIDA, INC.

## Current Principal Place of Business:

2641 AIRPORT ROAD  
SUITE A-101  
NAPLES, FL 34112

## New Principal Place of Business:

2641 AIRPORT ROAD  
SUITE A-101  
NAPLES, FL 34112 US

## Current Mailing Address:

2641 AIRPORT ROAD  
SUITE A-101  
NAPLES, FL 34112

## New Mailing Address:

650 HAPPY ACRES RD  
BREVARD, NC 28712 US

FEI Number: 59-2198011

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

CLIFTON, THOMAS Z  
2641 AIRPORT RD S A-101  
NAPLES, FL 34112 US

## Name and Address of New Registered Agent:

CLIFTON, THOMAS Z P  
2641 AIRPORT RD S A-101  
NAPLES, FL 34112 US

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: THOMAS Z. CLIFTON

04/20/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: CLIFTON, THOMAS Z  
Address: 2641 AIRPORT RD S A-101  
City-St-Zip: NAPLES, FL 34112

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: CLIFTON, THOMAS Z P  
Address: 2641 AIRPORT RD S A-101  
City-St-Zip: NAPLES, FL 34112 US

Title: VP ( ) Change (X) Addition  
Name: CLIFTON, BARBARA A VP  
Address: 650 HAPPY ACRES RD  
City-St-Zip: BREVARD, NC 28712 US

I hereby certify that the information supplied with this filing does not qualify for the 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: THOMAS Z. CLIFJTON

P

04/20/2006

Electronic Signature of Signing Officer or Director

Date