

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000051519

Entity Name: "2" S. B.W. & ASSOCIATES INC.

FILED  
Apr 22, 2008  
Secretary of State

## Current Principal Place of Business:

630 SW AVE J  
BELLE GLADE, FL 33430

## New Principal Place of Business:

## Current Mailing Address:

349 S.E. 3RD STREET  
BELLE GLADE, FL 33430

## New Mailing Address:

5800 HWY. 441, SE  
OKEECHOBEE, FL 34974

FEI Number: 65-0930953

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

DOWNING, CLIFFORD  
301 SW 8TH STREET  
BELLE GLADE, FL 33430 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: D ( ) Delete  
Name: WALKER, JAVIN  
Address: 630 SW AVE. J  
City-St-Zip: BELLE GLADE, FL 33430

Title: ST ( ) Delete  
Name: SEWELL, ANGELETTA  
Address: 4747 WEST WATERS APT 407  
City-St-Zip: TAMPA, FL 33614

Title: P ( ) Delete  
Name: THROOP, KENNETH R  
Address: P.O. BOX 2682  
City-St-Zip: OKEECHOBEE, FL 34972

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: ST (X) Change ( ) Addition  
Name: SEWELL, ANGELETTA  
Address: 505 SW 7TH ST.  
City-St-Zip: BELLE GLADE, FL 33430

Title: P (X) Change ( ) Addition  
Name: THROOP, KENNETH R  
Address: 5800 HWY. 441, SE  
City-St-Zip: OKEECHOBEE, FL 34974

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: JAVIN WALKER

Electronic Signature of Signing Officer or Director

DIR.

04/22/2008

\_\_\_\_\_ Date