

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S91842

FILED  
Feb 11, 2009  
Secretary of State

Entity Name: FOUNTAIN OF YOUTH OF S.W. FL., INC.

## Current Principal Place of Business:

1404 53RD TERR  
CAPE CORAL, FL 33914

## New Principal Place of Business:

## Current Mailing Address:

C/O JEAN MANSSON  
5205 SARASOTA CT  
CAPE CORAL, FL 33904

## New Mailing Address:

FEI Number: 65-0294394      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

MANSSON, JEAN  
5205 SARASOTA CT  
CAPE CORAL, FL 33904      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: P ( ) Delete  
Name: GRONVALL, PERERIK  
Address: 1404 -53RD TERR  
City-St-Zip: CAPE CORAL, FL 33914

Title: VP ( ) Delete  
Name: GRONVALL, EVA  
Address: 1404 -53RD TERR  
City-St-Zip: CAPE CORAL, FL 33914

Title: S ( ) Delete  
Name: BERGLUND, CATARINA  
Address: 1404 -53RD TERR  
City-St-Zip: CAPE CORAL, FL 33914

Title: T ( ) Delete  
Name: GRONVALL, PONTUS  
Address: 1404 -53RD TERR  
City-St-Zip: CAPE CORAL, FL 33914

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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: JEAN MANSSON

RA

02/11/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date