

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# V20634

FILED
May 04, 2005
Secretary of State

Entity Name: SOUTHWEST FLORIDA PROPERTIES, INC.

Current Principal Place of Business:

1901 HONDA DR
FORT MYERS, FL 33907 US

New Principal Place of Business:

3333 WHIDDEN LOOP RD
IMMOKALEE, FL 34142 US

Current Mailing Address:

1901 HONDA DR
FORT MYERS, FL 33907 US

New Mailing Address:

3333 WHIDDEN LOOP ROAD
IMMOKALEE, FL 34142 US

FEI Number: 59-3118372

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

OESCHAIRE, MICHAEL
1901 HONDA DR
FORT MYERS, FL 33907 US

Name and Address of New Registered Agent:

NESCHAIRE, MICHAEL
3333 WHIDDEN LOOP ROAD
IMMOKALEE, FL 34142 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: MICHAEL DESCHAIINE

05/04/2005

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: DESCHAIINE, MICHAEL E, .
Address: 1901 HONDA DR
City-St-Zip: FORT MYERS, FL 33907

Title: S () Delete
Name: DESCHAIINE, MARLENA A, .
Address: 4635 ROCKWOOD CIRCLE
City-St-Zip: NORTH FT MYERS, FL 33903

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: DESCHAIINE, MICHAEL E, .
Address: 3333 WHIDDEN LOOP ROAD
City-St-Zip: IMMOKALEE, FL 34142 US

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

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: MICHAEL DESCHAIINE

P

05/04/2005

Electronic Signature of Signing Officer or Director

Date