

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# V71541

FILED
Mar 24, 2009
Secretary of State

Entity Name: SUNWEST WATERWAY MANAGEMENT INC.

Current Principal Place of Business:

655 17TH ST. WEST
UNIT D
PALMETTO, FL 34221 US

New Principal Place of Business:

Current Mailing Address:

SUN WEST WATERWAY MGMT
P. O. BOX 1415
PALMETTO, FL 34220 US

New Mailing Address:

FEI Number: 65-0362502 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SEMAGO, AL
1005 22 ST W
BRADENTON, FL 34205 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: SEMAGO, SUZANNE D.,
Address: 1005 22ND STREET WEST
City-St-Zip: BRADENTON, FL

Title: DV () Delete
Name: SEMAGO, AL
Address: 1005 22ND ST W.
City-St-Zip: BRANDENTON, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: SEMAGO, SUZANNE D.,
Address: 1005 22ND STREET WEST
City-St-Zip: BRADENTON, FL 34205

Title: DV (X) Change () Addition
Name: SEMAGO, AL
Address: 1005 22ND ST W.
City-St-Zip: BRANDENTON, FL 34205

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: AL SEMAGO

VP

03/24/2009

Electronic Signature of Signing Officer or Director

_____ Date