

**2016 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P09000030122

**FILED  
Jan 16, 2016  
Secretary of State  
CC1655408941**

**Entity Name:** ELEVATOR RESCUE TRAINING OF SWFL, INC.

**Current Principal Place of Business:**

3840 SPRINGSIDE DR.  
ESTERO, FL 33928

**Current Mailing Address:**

3840 SPRINGSIDE DR.  
ESTERO, FL 33928

**FEI Number: 26-4476648**

**Certificate of Status Desired: No**

**Name and Address of Current Registered Agent:**

SWAN, LAWRENCE  
709 CAPE CORAL PARKWAY WEST  
CAPE CORAL, FL 33914 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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Officer/Director Detail :**

Title PD  
Name DUFFY, KENNETH M  
Address 3840 SPRINGSIDE DR.  
City-State-Zip: ESTERO FL 33928

Title VPST  
Name DUFFY, TERRY D  
Address 3840 SPRINGSIDE DR.  
City-State-Zip: ESTERO FL 33928

Title D  
Name DUFFY, TERRY D  
Address 3840 SPRINGSIDE DR.  
City-State-Zip: ESTERO FL 33928

*I hereby 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 all other like empowered.*

**SIGNATURE: TERRY DUFFY**

**VPST**

**01/16/2016**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date