

**2017 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P16000077094

**Entity Name:** MAYFLOWER OF SWFL INC

**Current Principal Place of Business:**

4348 SW 18TH AVENUE  
CAPE CORAL, FL 33914

**Current Mailing Address:**

1314 LAFAYETTE STREET  
CAPE CORAL, FL 33904 US

**FEI Number:** 81-3970098

**Certificate of Status Desired:** No

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

HILL, THOMAS W  
1314 LAFAYETTE STREET  
CAPE CORAL, FL 33904 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 P  
Name HEIDUSCHKA, RAINER DR  
Address AM STOCKACKER 36  
City-State-Zip: TRIPPSTADT FL 67705

Title VP  
Name HEIDUSCHKA, ANNIKA  
Address AM STOCKACKER 36  
City-State-Zip: TRIPPSTADT FL 67705

Title T  
Name HEIDUSCHKA, CORINA  
Address AM STOCKACKER 36  
City-State-Zip: TRIPPSTADT FL 67705

*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: DR. RAINER HEIDUSCHKA**

P

03/20/2017

Electronic Signature of Signing Officer/Director Detail

Date