

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F98000005495

FILED  
Feb 16, 2012  
Secretary of State

Entity Name: C.D. SMITH CONSTRUCTION, INC.

**Current Principal Place of Business:**

889 E. JOHNSON STREET  
FOND DU LAC, WI 54935

**New Principal Place of Business:**

**Current Mailing Address:**

889 E. JOHNSON STREET  
FOND DU LAC, WI 54935

**New Mailing Address:**

FEI Number: 39-0759260

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 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

**OFFICERS AND DIRECTORS:**

Title: PD  
Name: SMITH, GARY M  
Address: 889 E. JOHNSON STREET  
City-St-Zip: FOND DU LAC, WI 54935

Title: VD  
Name: SMITH, JUSTIN  
Address: 889 E. JOHNSON STREET  
City-St-Zip: FOND DU LAC, WI 54935

Title: S  
Name: SMITH, PATRICK  
Address: 889 E. JOHNSON STREET  
City-St-Zip: FOND DU LAC, WI 54935

Title: VD  
Name: BAKER, ROBERT D  
Address: 889 E. JOHNSON STREET  
City-St-Zip: FOND DU LAC, WI 54935

Title: D  
Name: FORTUNE, MIKE  
Address: 101 CAMELOT DRIVE  
City-St-Zip: FOND DU LAC, WI 54935

Title: D  
Name: SMITH, MARY L  
Address: 889 E. JOHNSON STREET  
City-St-Zip: FOND DU LAC, WI 54935

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: ROBERT D BAKER

VP

02/16/2012

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date