

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# G94383

FILED
Jan 30, 2009
Secretary of State

Entity Name: WHARTON-SMITH, INC.

Current Principal Place of Business:

750 MONROE RD
SANFORD, FL 32771

New Principal Place of Business:

Current Mailing Address:

POB 471028
LAKE MONROE, FL 32747

New Mailing Address:

FEI Number: 59-2392802 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DAVOLI, RONALD F
750 MONROE RD
SANFORD, FL 32771 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: CD () Delete
Name: SMITH, GEORGE E
Address: 2333 ALAQUA DR
City-St-Zip: LONGWOOD, FL 32779

Title: D () Delete
Name: WHARTON, WILLIAM R
Address: 401 MOSSY STONE COURT
City-St-Zip: LONGWOOD, FL 32779

Title: V () Delete
Name: PALMER, ERICKSON H
Address: 1531 SUNSET DR
City-St-Zip: WINTER PARK, FL 32789

Title: VS () Delete
Name: ROBINSON, WILLIAM C JR
Address: 307 FOX VALLEY DR
City-St-Zip: LONGWOOD, FL 32779

Title: PDT () Delete
Name: DAVOLI, RONALD F
Address: 1644 EAGLE HURST CIR
City-St-Zip: WINTER SPRINGS, FL 32708

Title: V () Delete
Name: MCCURDY, CHARLES A
Address: 4600 NEBRASKA AVE
City-St-Zip: SANFORD, FL 32771

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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

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

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: WILLIAM C. ROBINSON JR

VS

01/30/2009

Electronic Signature of Signing Officer or Director

_____ Date