

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# J81878

FILED
Apr 24, 2008
Secretary of State

Entity Name: SMART GROUP ACCEPTANCE CORPORATION

Current Principal Place of Business:

4100 TAMIAMI TRAIL N.
NAPLES, FL 34103

New Principal Place of Business:

Current Mailing Address:

4100 TAMIAMI TRAIL N.
NAPLES, FL 34103

New Mailing Address:

FEI Number: 59-2851653 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DEVOE, MARK A.
2601 AIRPORT ROAD SOUTH
NAPLES, FL 34112 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: PD () Delete
Name: DEVOE, RICHARD H.,
Address: 4100 TAMIAMI TRAIL N.
City-St-Zip: NAPLES, FL

Title: STD () Delete
Name: DEVOE, MARK A.,
Address: 4100 TAMIAMI TRAIL N.
City-St-Zip: NAPLES, FL

Title: VD () Delete
Name: DEVOE, DONALD P.,
Address: 4100 TAMIAMI TRAIL N.
City-St-Zip: NAPLES, FL

Title: D () Delete
Name: KELLY, CHARLES,
Address: 2640 GOLDEN GATE PKWY - SUITE 305
City-St-Zip: NAPLES, FL 34105

Title: D () Delete
Name: WHITLEY, STEVEN R,
Address: 2075 WEST FIRST ST
City-St-Zip: FT MYERS, FL 33902

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: DEVOE, RICHARD H.,
Address: 106 WILDERNESS DR
City-St-Zip: NAPLES, FL 34102

Title: STD (X) Change () Addition
Name: DEVOE, MARK A.,
Address: 1843 8TH ST S
City-St-Zip: NAPLES, FL 34102

Title: VD (X) Change () Addition
Name: DEVOE, DONALD P.,
Address: 530 16TH AVE S
City-St-Zip: NAPLES, FL 34102

Title: D (X) Change () Addition
Name: KELLY, CHARLES,
Address: 2390 TAMIAMI TRL N - SUITE 204
City-St-Zip: NAPLES, FL 34103

Title: D (X) Change () Addition
Name: WHITLEY, STEVEN R,
Address: 2075 WEST FIRST ST - SUITE 300
City-St-Zip: FT MYERS, FL 33902

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: MARK A DEVOE

_____ Electronic Signature of Signing Officer or Director

STD

04/24/2008

_____ Date