

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N29702

FILED  
Jan 06, 2010  
Secretary of State

**Entity Name:** LES AND JUDY SMOUT FOUNDATION, INC.

**Current Principal Place of Business:**

LES SMOUT  
2378 ANTHONY AVENUE  
CLEARWATER, FL 33759 US

**New Principal Place of Business:**

**Current Mailing Address:**

LES SMOUT  
PO BOX 344  
SAFETY HARBOR, FL 34695 US

**New Mailing Address:**

**FEI Number:** 65-0118624      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

SMOUT, LES  
100 N. STARCREST  
CLEARWATER, FL 33765 US

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

SMOUT, LES R  
2378 ANTHONY AVENUE  
CLEARWATER, FL 33759 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: LES SMOUT

01/06/2010

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PDT  
Name: SMOUT, LES  
Address: 2378 ANTHONY AVENUE  
City-St-Zip: CLEARWATER, FL 33759

Title: DS  
Name: SMOUT, JUDY  
Address: 2378 ANTHONY AVENUE  
City-St-Zip: CLEARWATER, FL 33759

Title: D  
Name: HEYMAN, JANET S  
Address: 2378 ANTHONY AVENUE  
City-St-Zip: CLEARWATER, FL 33759

Title: D  
Name: GRUDIS, JOANNE S  
Address: 2378 ANTHONY AVENUE  
City-St-Zip: CLEARWATER, FL 33759

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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: LES R SMOUT

PD

01/06/2010

Electronic Signature of Signing Officer or Director

Date