

# 2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000133519

Entity Name: THOMAS R. SMITH & COMPANY, INC.

FILED  
Jan 10, 2010  
Secretary of State

**Current Principal Place of Business:**

12165 DIVIDING OAKS TRAIL E  
JACKSONVILLE, FL 32223

**New Principal Place of Business:**

**Current Mailing Address:**

12165 DIVIDING OAKS TRAIL E  
JACKSONVILLE, FL 32223

**New Mailing Address:**

FEI Number: 38-3694250

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

SMITH, THOMAS R  
12165 DIVIDING OAKS TRAIL E  
JACKSONVILLE, FL 32223 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  
Name: SMITH, THOMAS R  
Address: 12165 DIVIDING OAKS TRAIL E  
City-St-Zip: JACKSONVILLE, FL 32223

Title: VPD  
Name: SMITH, TIMOTHY R  
Address: 3737 LORETTO RD, APT 405  
City-St-Zip: JACKSONVILLE, FL 32223

Title: VPD  
Name: SMITH, TROY R  
Address: 12165 DIVIDING OAKS TRAIL E  
City-St-Zip: JACKSONVILLE, FL 32223

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: THOMAS R SMITH

PRED

01/10/2010

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

\_\_\_\_\_ Date