

**2019 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P18000066777

**Entity Name:** SMF MANAGEMENT, INC.

**Current Principal Place of Business:**

8156 FIDDLER'S CREEK PARKWAY  
NAPLES, FL 34114

**Current Mailing Address:**

8156 FIDDLER'S CREEK PARKWAY  
NAPLES, FL 34114 US

**FEI Number: 83-1484773**

**Certificate of Status Desired: No**

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

WOODWARD, MARK J ESQ.  
3200 TAMIAMI TRL N.  
SUITE 200  
NAPLES, FL 34103 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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Officer/Director Detail :**

Title D,P  
Name FERRAO, AUBREY J  
Address 8156 FIDDLER'S CREEK PARKWAY  
City-State-Zip: NAPLES FL 34114

Title CFO  
Name DINARDO, ANTHONY  
Address 8156 FIDDLER'S CREEK PARKWAY  
City-State-Zip: NAPLES FL 34114

Title D, S  
Name FERRAO, TINA M  
Address 8156 FIDDLER'S CREEK PARKWAY  
City-State-Zip: NAPLES FL 34114

Title D,VP  
Name FERRAO, MARISSA A  
Address 8156 FIDDLER'S CREEK PARKWAY  
City-State-Zip: NAPLES FL 34114

Title D,VP  
Name FERRAO, DANIEL A  
Address 8156 FIDDLER'S CREEK PARKWAY  
City-State-Zip: NAPLES FL 34114

Title D,VP  
Name FERRAO, EVA A  
Address 8156 FIDDLER'S CREEK PARKWAY  
City-State-Zip: NAPLES FL 34114

*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: ANTHONY DINARDO**

**CFO**

**02/25/2019**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date