

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 184214

FILED  
Apr 15, 2009  
Secretary of State

Entity Name: NEW SMYRNA SHEET METAL WORKS INC

**Current Principal Place of Business:**

326 CANAL STREET  
NEW SMYRNA BEACH, FL 32168

**New Principal Place of Business:**

**Current Mailing Address:**

326 CANAL STREET  
NEW SMYRNA BEACH, FL 32168

**New Mailing Address:**

FEI Number: 59-0734044

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

COLE, J. MITCHELL  
585 TIMBERLANE DR.  
NEW SMYRNA BCH., FL 32168 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: COLE, J MITCHELL  
Address: 585 TIMBERLANE DR.  
City-St-Zip: NEW SMYRNA BEACH, FL

Title: STD ( ) Delete  
Name: COLE, J.M.  
Address: 104 10TH ST.  
City-St-Zip: NEW SMYRNA BCH., FL

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PD (X) Change ( ) Addition  
Name: COLE, J MITCHELL  
Address: 585 TIMBERLANE DR.  
City-St-Zip: NEW SMYRNA BEACH, FL 32168

Title: STD (X) Change ( ) Addition  
Name: COLE, J.M.  
Address: 104 10TH ST.  
City-St-Zip: NEW SMYRNA BCH., FL 32168

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: J. MITCHELL COLE

PD

04/15/2009

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

\_\_\_\_\_  
Date