2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # 231557

1. Entity Name LEROY SMITH, INC.



Mailing Address

DO NOT WRITE IN THIS SPACE

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4776 OLD DIXIE

PO BOX 716 VERO BEACH, FL 32961

Principal Place of Business

4776 OLD DIXIE

PO BOX 716 VERO BEACH, FL 32961

FILED Jan 12, 2004 08:00 AM Secretary of State



01062004

No Chg-P

CR2E034 (10/03)

4. FEI Number 59-0879336

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

1/07/04

FENNELL, DARRELL 979 BEACHLAND BLVD VERO BCH., FL 32963				DO NOT WRITE IN THIS SPACE		
8. The above the obligate SIGNATURE.	named entity submits this statement for the putions of registered agent,	rpose of changing its registe	ered office or re	egistered agent, or bo	th, in the State of Florida. I am familiar with,	and accept
SIGNATURE.	Signature, typed or printed name of registered agent and title if	oppricable. (NOTE, Registe	red Agent signalura	required when reinstating)	DATE	
	E NOW!!! FEE IS \$150.00 ay 1, 2004 Fee will be \$550.00	Election Campaign Fin Trust Fund Contribution		\$5.00 May Be Added to Fees	<u> </u>	
10.	OFFICERS AND DIRECT	TORS			- 01/12/04-80029-004 1	בנו טען.
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD SMITH, ELSON, R, JR. 649 LAKE DRIVE VERO BEACH, FL 32960,				01712704-00023-004 1	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD RITTER, SMITH S 111 JOHN'S ISLAND DRIVE VERO BEACH, FL				s de la succión de la secono en el en el	51 To 17 To 17
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP SMITH, ELSON R III 1766 CORAL WAY S VERO BEACH, FL 32963				NOT WRITE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP				IN T	THIS SPACE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP						
TITLE NAME STREET ADDRESS CITY - ST-ZIP					_ ·	
12. I hereby of indicated of the corphanged.	pertify that the information supplied with this filing on this report or supplemental report is true are portation or the receiver or trustee empowered or on an attachment with an addicase, with allied	ng does not qualify for the extended accurate and that my sign to execute this report as requested like ampowered.	emption stated lature shall hav ulred by Chap	d in Section 119.07(3)(re the same legal effecter 607, Florida Statute	Florida Statutes. I further certify that the intrastit as if made under oath; that I am an officers; and that my name appears in Block 10 or	nformation or director Block 11 if