

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 396631

FILED
Feb 12, 2009
Secretary of State

Entity Name: SMOAK, DAVIS & NIXON PROPERTIES, INC.

Current Principal Place of Business:

1514 NIRA STREET
JACKSONVILLE, FL 32207

New Principal Place of Business:

Current Mailing Address:

1514 NIRA STREET
JACKSONVILLE, FL 32207

New Mailing Address:

5011 GATE PARKWAY
BUILDING 100, SUITE 300
JACKSONVILLE, FL 32256

FEI Number: 59-1379395

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BURNAM, R. LAVON
1514 NIRA STREET
JACKSONVILLE, FL 32207 US

Name and Address of New Registered Agent:

BURNAM, R. LAVON
5011 GATE PARKWAY
BUILDING 100, SUITE 300
JACKSONVILLE, FL 32256 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:

02/12/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: BURNAM, R. LAVON
Address: 1514 NIRA STREET
City-St-Zip: JACKSONVILLE, FL 32207

Title: SD () Delete
Name: BOWEN, JIM L
Address: 1514 NIRA ST
City-St-Zip: JACKSONVILLE, FL 32207

Title: TD () Delete
Name: SHELTON, JEFFREY L.
Address: 1514 NIRA STREET
City-St-Zip: JACKSONVILLE, FL 32207

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: BURNAM, R. LAVON
Address: 5011 GATE PARKWAY, BLDG 100, SUITE 300
City-St-Zip: JACKSONVILLE, FL 32256

Title: SD (X) Change () Addition
Name: BOWEN, JIM L
Address: 5011 GATE PARKWAY, BLDG 100, SUITE 300
City-St-Zip: JACKSONVILLE, FL 32256

Title: TD (X) Change () Addition
Name: SHELTON, JEFFREY L.
Address: 5011 GATE PARKWAY, BLDG 100, SUITE 300
City-St-Zip: JACKSONVILLE, FL 32256

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: JEFFREY L. SHELTON, TREASURER

TD

02/12/2009

Electronic Signature of Signing Officer or Director

Date