

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 431748

FILED  
Feb 19, 2008  
Secretary of State

Entity Name: LEVIE D. SMITH AND ASSOCIATES, INC.

**Current Principal Place of Business:**

5104 FORESTGREEN DRIVE EAST  
LAKELAND, FL 33811 US

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 7246  
LAKELAND, FL 33807 US

**New Mailing Address:**

FEI Number: 59-1487143

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

MISIASZEK, MARK  
5104 FORESTGREEN DRIVE EAST  
LAKELAND, FL 33811 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: MISIASZEK, MARK  
Address: 5104 FORESTGREEN DRIVE EAST  
City-St-Zip: LAKELAND, FL 33811

Title: STD ( ) Delete  
Name: JOAN MISIASZEK,  
Address: 5104 FORESTGREEN DR. E.  
City-St-Zip: LAKELAND, FL

Title: VD ( ) Delete  
Name: MISIASZEK, MARK,  
Address: 5104 FORESTGREEN DR. E.  
City-St-Zip: LAKELAND, FL

Title: D ( ) Delete  
Name: TAYLOR, DARCY  
Address: 2805 FAIRMOUNT AVENUE  
City-St-Zip: LAKELAND, FL 33803

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

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: MARK MISIASZEK

PD

02/19/2008

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

\_\_\_\_\_  
Date