

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 587861

FILED  
Apr 13, 2005  
Secretary of State

Entity Name: TODD L. SMITH, P.A.

## Current Principal Place of Business:

403 SW 8TH ST.  
FT. LAUDERDALE, FL 33315 US

## New Principal Place of Business:

2601 E. OAKLAND PARK BLVD.  
202  
FT. LAUDERDALE, FL 33306 US

## Current Mailing Address:

PO BOX 7315  
FT LAUDERDALE, FL 333387315 US

## New Mailing Address:

FEI Number: 59-1852026      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

SMITH, TODD L  
403 SW 8TH STREET  
FT. LAUDERDALE, FL 33315 US

## Name and Address of New Registered Agent:

SMITH, TODD L  
2601 E. OAKLAND PARK BLVD.  
202  
FT. LAUDERDALE, FL 33306 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: TODD L. SMITH

04/13/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: SMITH, TODD L  
Address: P.O. BOX 7315  
City-St-Zip: FORT LAUDERDALE, FL 33338

Title: VD ( ) Delete  
Name: SMITH, NAOMI B  
Address: P.O. BOX 7315  
City-St-Zip: FT LAUDERDALE, FL 33338

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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 for the exemption stated in Section 119.07(3)(i), 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: TODD L. SMITH

PD

04/13/2005

Electronic Signature of Signing Officer or Director

Date