

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 591132

FILED
Mar 31, 2005
Secretary of State

Entity Name: SMITTY'S LOCKSMITH SERVICE, INC.

Current Principal Place of Business:

273 S.E. EYERLY AVE
PORT ST. LUCIE, FL 34983

New Principal Place of Business:

7548 SOUTH US 1
#321
PORT ST. LUCIE, FL 34952

Current Mailing Address:

273 SE EYERLY AVE
PORT ST. LUCIE, FL 34983 US

New Mailing Address:

7548 SOUTH US 1
321
PORT ST. LUCIE, FL 34952 US

FEI Number: 59-1862969

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SCHMIDT, JOHN C
273 SE EYERLY AVE
PT ST LUCIE, FL 34983 US

Name and Address of New Registered Agent:

SCHMIDT, JOHN C
2521 DYER ROAD
PT ST LUCIE, FL 34952 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:

03/31/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: VD () Delete
Name: SCHMIDT, CHARLES W.,
Address: 763 N.E. EMERSON ST.
City-St-Zip: PORT ST. LUCIE, FL

Title: TD () Delete
Name: SCHMIDT, ANNE M.,
Address: 763 N.E. EMERSON ST.
City-St-Zip: PORT ST. LUCIE, FL

Title: PD () Delete
Name: SCHMIDT, JOHN C.,
Address: 273 SE EYERLY AVE
City-St-Zip: PORT ST. LUCIE, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: PD (X) Change () Addition
Name: SCHMIDT, JOHN C.,
Address: 2521 DYER ROAD
City-St-Zip: PORT ST. LUCIE, FL 34952

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: JOHN C SCHMIDT

PD

03/31/2005

Electronic Signature of Signing Officer or Director

Date