

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Apr 26, 2006 8:00 am**  
**Secretary of State**

04-26-2006 90215 022 \*\*\*150.00

**DOCUMENT # 592199**

1. Entity Name  
**JAN SMITH AND COMPANY**



Principal Place of Business  
**1111 3RD AVENUE W  
SUITE 110  
BRADENTON, FL 34205-7845 US**

Mailing Address  
**1111 3RD AVENUE W  
SUITE 110  
BRADENTON, FL 34205-7845 US**

2. Principal Place of Business  
**1001 3<sup>RD</sup> AVENUE WEST**

3. Mailing Address  
**1001 3<sup>RD</sup> AVENUE WEST**

Suite, Apt. #, etc.  
**SUITE 300**

Suite, Apt. #, etc.  
**SUITE 300**

City & State  
**BRADENTON, FL**

City & State  
**BRADENTON, FL**

Zip  
**34205**

Country  
**USA**

Zip  
**34205**

Country  
**USA**

02022006

Chg-P

CR2E034 (11/05)

4. FEI Number  
**59-1880794**

Applied For  
Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional  
Fee Required**

## 6. Name and Address of Current Registered Agent

**SMITH, JAN E  
1111 3RD AVENUE W.  
SUITE 110  
BRADENTON, FL 34205**

## 7. Name and Address of New Registered Agent

Name  
**SMITH, JAN E.**  
Street Address (P.O. Box Number is Not Acceptable)  
**1001 3<sup>RD</sup> AVENUE WEST, SUITE 300**  
City  
**BRADENTON** **FL** Zip Code  
**34205**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00  
After May 1, 2006 Fee will be \$550.00**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00 May Be  
Added to Fees**

## 10. OFFICERS AND DIRECTORS

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**P  
SMITH, JAN E.  
34 TIDY ISLAND BLVD  
BRADENTON, FL 34210** ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Delete

## 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

**SIGNATURE:** JAN E. SMITH, PRESIDENT

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

*Jan E. Smith* **PRG** **4/25/06**

(941) 748-6612

Daytime Phone #