

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 681464

FILED  
Jan 07, 2008  
Secretary of State

Entity Name: CRAIG A. SMITH & ASSOCIATES, INC.

## Current Principal Place of Business:

1000 W. MCNAB RD.  
SUITE 200  
POMPANO BCH., FL 33069

## New Principal Place of Business:

## Current Mailing Address:

1000 W. MCNAB RD.  
SUITE 200  
POMPANO BCH., FL 33069

## New Mailing Address:

PO BOX 9845  
FORT LAUDERDALE, FL 33310

FEI Number: 59-2010476

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

SMITH, STEPHEN C.  
1000 W MCNAB RD  
STE 200  
POMPANO BCH, FL 33069 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: VD ( ) Delete  
Name: SMITH, STEPHEN C.,  
Address: 9960 MAJORCA PL  
City-St-Zip: BOCA RATON, FL

Title: VD ( ) Delete  
Name: MILITA, M. DALE,  
Address: 36910 3RD ST.  
City-St-Zip: CANAL POINT, FL

Title: PD ( ) Delete  
Name: SCHRINER, GENE R.,  
Address: 1975 SOUTH CLUB DRIVE  
City-St-Zip: W. PALM BEACH, FL

Title: S ( ) Delete  
Name: MCBRIDE, STEPHEN A.,  
Address: 6001 NW 62 COURT  
City-St-Zip: PARKLAND, FL 33067

## 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: STEPHEN C. SMITH

VD

01/07/2008

Electronic Signature of Signing Officer or Director

Date