

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 687843

FILED  
Jan 06, 2009  
Secretary of State

Entity Name: LLOYD SMITH, III AND ASSOCIATES, INC.

**Current Principal Place of Business:**

1336 SEA MARSH COVE  
AMELIA ISLAND, FL 32034 US

**New Principal Place of Business:**

**Current Mailing Address:**

1336 SEA MARSH COVE  
AMELIA ISLAND, FL 32034 US

**New Mailing Address:**

FEI Number: 59-2035592      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

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

ASBURY, TOM  
1360 MARSH LANDING PARKWAY  
SUITE 108  
JACKSONVILLE BEACH, FL 32250 US

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

MOORE, TERRY A  
50 NORTH LAURA STREET  
SUITE 1100  
JACKSONVILLE, FL 32201 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: TERRY A. MOORE

01/06/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: SMITH, III, LLOYD,  
Address: 12 SEA MARSH COVE  
City-St-Zip: FERNANDINA BEACH, FL 32034

Title: VPT ( ) Delete  
Name: SMITH, MARIE,  
Address: 12 SEA MARSH COVE  
City-St-Zip: FERNANDINA BEACH, FL 32034

Title: VPS ( ) Delete  
Name: NIX, BARRY  
Address: 2312 WASHINGTON ROAD  
City-St-Zip: AUGUSTA, GA

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

Title: PD (X) Change ( ) Addition  
Name: SMITH, III, LLOYD  
Address: 12 SEA MARSH COVE  
City-St-Zip: FERNANDINA BEACH, FL 32034

Title: VPT (X) Change ( ) Addition  
Name: SMITH, MARIE  
Address: 12 SEA MARSH COVE  
City-St-Zip: FERNANDINA BEACH, FL 32034

Title: VPS (X) Change ( ) Addition  
Name: NIX, BARRY  
Address: 302 4TH STREET  
City-St-Zip: AUGUSTA, GA 30901

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: LLOYD SMITH, III

P

01/06/2009

Electronic Signature of Signing Officer or Director

Date