(Re	questor's Name)		
(Address)			
(Ad	dress)		
(Cit	y/State/Zip/Phone) #)	
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6/5/06

COVER LETTER

TO: Amendment Section Division of Corporations		
SUBJECT: R.W. Smith & Associates, Inc		
	Corporation)	
DOCUMENT NUMBER:		
The enclosed Statement of Change of Registered Office	ce/Agent and fee are submitted for filing.	
Please return all correspondence concerning this matter		
Jeanette Gagnon		
	ontact Person)	
R.W. Smith & Associates, Inc. (Firm/Company)		
(initive	ompany)	
10604 NE 38th Place, Suite 1	25 Kirkland WA 98033	
	iress)	
(City/State a	nd Zip Code)	
For further information concerning this matter, please	call:	
Jeanette Gagnon	at (425) 803-9893	
(Name of Contact Person)	at (425) 803-9893 (Area Code & Daytime Telephone Number)	
Enclosed is a \$35.00 check made payable to the Depar	tment of State.	
Mailing Address: Amendment Section	Street Address: Amendment Section	
Division of Corporations	Division of Corporations	
P.O. Box 6327	Clifton Building	
Tallahassee, FL 32314	2661 Executive Center Circle Tallahassee, FL 32301	
	Tallallassee, I'L 32301	

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

statement of char	nge is submitted for a corporation	517.0502, 607.1508, or 617.1508, Florida Statutes, this n organized under the laws of the State of	
	ne corporation: R.W. Smith & As		
		Place, Suite 125, Kirkland, WA 98033	
3. The mailing ac	ddress (if different):		
4. Date of incorp	oration/qualification: May 1985	5 Document number:	
5. The name and Florida Depart		stered agent and registered office on file with the	
	Cobb, Philip N		
	8550 Ulmerton Road, Su	uite 201	
	Largo, FL 33771		
6. The name and (if changed):	street address of the new registere	ed agent (if changed) and /or registered office	
	Cobb, Philip N		
	111 Second Ave NE, Su	ite 310	
	(P.O. Box NOT acceptable)		
-	St. Petersburg, FL 3370		
The street address as changed will I	ss of its registered office and the be identical.	street address of the business office of its registered agent,	
Such change was authorized by the	s authorized by resolution duly a board, or the corporation has b	adopted by its board of directors or by an officer so seen notified in writing of the change.	
		Michelle E. Heyne, CFO	
I banaha anana	coPan officer or director) he appointment as registered ago comply with the provisions of a lam familiar with and accept to filed merely to reflect a chang been notified in writing of this c	(Printed or typed name and title) tent and agree to act in this capacity. tell statutes relative to the proper and complete performance the obligation of my position as registered agent. Or, if this te in the registered office address, I hereby confirm that the hange.	
(Sigr	nature of Registered Agent)	(Date)	
If signing on beh	alf of an entity:		
(Ту	ped or Printed Name)	-	

Make checks payable to Florida Department of State
Mail to: Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314

* * * FILING FEE: \$35.00 * * *