



**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Aug 01, 2005 08:00 AM
Secretary of State

DOCUMENT # F01000006604			
1. Entity Name SMITH SYSTEM MANUFACTURING COMPANY			
Principal Place of Business 1714 EAST 14TH STREET PLANO, TX 75074		Mailing Address 1714 EAST 14TH STREET PLANO, TX 75074	
DO NOT WRITE IN THIS SPACE			
		07122005 No Chg-P CR2E034 (10/03)	
		4. FEI Number 41-1424908	Applied For <input type="checkbox"/> Not Applicable
		5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Name and Address of Current Registered Agent CT CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324			DO NOT WRITE IN THIS SPACE
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 _____ <small>Signature typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when re-stating)</small> DATE _____			
FILE NOW!!! FEE IS \$550.00 Due by September 7, 2005		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS			
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PT AUSTIN, JAMES L 1714 E. 14TH STREET PLANO, TX 75074		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	C SCHAAD, WILLIAM B 1714 E 14TH STREET PLANO, TX 75074		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	T AUSTIN, JAMES L 1714 E. 14TH STREET PLANO, TX 75074		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	CD RISDALL, CHARLES A 1714 E. 14TH STREET PLANO, TX 75074		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	V RISDALL, WILLIAM T 1714 E. 14TH STREET PLANO, TX 75074		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D RISDALL, JOHN R 550 MAIN ST. NEW BRIGHTON, MN 55112		
12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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: 		07-22-05 Date	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Daytime Phone #	