

2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F10000001120

FILED
Feb 07, 2012
Secretary of State

Entity Name: LAWRENCE E. SMITH AND ASSOCIATES, INC.

Current Principal Place of Business:

C/O SCHOLASTIC INSURANCE OF FLORIDA
200 COUNTY LINE COURT #5
WINTER GARDEN, FL 34787

New Principal Place of Business:

1819 CLARKSON RD SUITE 300
CHESTERFIELD, MO 63017

Current Mailing Address:

1819 CLARKSON ROAD SUITE 300
CHESTERFIELD, MO 63017

New Mailing Address:

1819 CLARKSON RD SUITE 300
CHESTERFIELD, MO 63017

FEI Number: 43-1110928

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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

OFFICERS AND DIRECTORS:

Title: PRES
Name: SMITH, LAWRENCE E
Address: 1592 KENNESAW DR
City-St-Zip: CLERMONT, FL 34711

Title: SEC
Name: MARTIN, ROBERT A
Address: 667 HENRY AVENUE
City-St-Zip: BALLWIN, MO 63011

I hereby 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 all other like empowered.

SIGNATURE: LAWRENCE E. SMITH

PRES

02/07/2012

Electronic Signature of Signing Officer or Director

Date