

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F68015

Entity Name: SMF ASSOCIATES, INC.

FILED  
Feb 05, 2008  
Secretary of State

## Current Principal Place of Business:

6520 S.W. 7TH STREET  
MARGATE, FL 33068 US

## New Principal Place of Business:

## Current Mailing Address:

6520 S.W. 7TH STREET  
MARGATE, FL 33068

## New Mailing Address:

6520 S.W. 7TH STREET  
MARGATE, FL 33068 US

FEI Number: 59-2276728

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

MCQUAIDE, MARGARET TREAS  
6520 S.W. 7TH ST.  
MARGATE, FL 33068 US

## Name and Address of New Registered Agent:

MCQUAIDE, MARGARET PRES  
6520 S.W. 7TH ST.  
MARGATE, FL 33068 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: MARGARATE MCQUAIDE

02/05/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PST ( ) Delete  
Name: MCQUAIDE, MARGARET C PR/S/D  
Address: 6520 S.W. 7TH STREET  
City-St-Zip: MARGATE, FL 33068 US

Title: TREA ( ) Delete  
Name: MCQUAIDE, MARGARET TREAS  
Address: 6520 S.W. 7TH ST.  
City-St-Zip: MARGATE, FL 33068

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PST (X) Change ( ) Addition  
Name: MCQUAIDE, MARGARET PR/S/D  
Address: 6520 S.W. 7TH STREET  
City-St-Zip: MARGATE, FL 33068 US

Title: TREA (X) Change ( ) Addition  
Name: MCQUAIDE, MARGARET P/TREA  
Address: 6520 S.W. 7TH ST.  
City-St-Zip: MARGATE, FL 33068

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: MARGARET MC QUAIDE

PRES

02/05/2008

Electronic Signature of Signing Officer or Director

Date