

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F94000002247

FILED
Jul 08, 2005
Secretary of State

Entity Name: BULLOCK, SMITH AND PARTNERS, INC.

Current Principal Place of Business:

306 WEST DEPOT AVE.
SUITE 201
KNOXVILLE, TN 37917

New Principal Place of Business:

Current Mailing Address:

306 WEST DEPOT AVE.
SUITE 201
KNOXVILLE, TN 379177522

New Mailing Address:

FEI Number: 62-1193455

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SMITH, CHARLES D JR.
513 1/2 AMELIA STREET
ORLANDO, FL 32803 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DV () Delete
Name: ENDSLEY, JOHN W
Address: 306 WEST DEPOT
City-St-Zip: KNOXVILLE, TN 37917

Title: DC () Delete
Name: SMITH, CHARLES D
Address: 306 WEST DEPOT
City-St-Zip: KNOXVILLE, TN 37917

Title: DPT () Delete
Name: WHITE, STEPHEN L
Address: 300 9TH AVE SOUTH
City-St-Zip: KNOXVILLE, TN 37203

Title: DV () Delete
Name: HAUSMAN, CRAIG G
Address: 300 9TH AVENUE SOUTH
City-St-Zip: KNOXVILLE, TN 37203

Title: DV () Delete
Name: HAYES, P. MICHAEL
Address: 306 WEST DEPOT AVE.
City-St-Zip: KNOXVILLE, TN 37917

Title: DV () Delete
Name: FORKNER, DAVID L
Address: 306 WEST DEPOT AVE.
City-St-Zip: KNOXVILLE, TN 37917

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: CHARLES D. SMITH

DC

07/08/2005

Electronic Signature of Signing Officer or Director

Date