

2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 23, 2006 8:00 am
Secretary of State

01-23-2006 90121 010 ***150.00

DOCUMENT # F95000006008					
1. Entity Name J M SMITH CORPORATION					
Principal Place of Business 101 W. ST. JOHN ST. SUITE 305 SPARTANBURG, SC 29306			Mailing Address 101 W. ST. JOHN ST. SUITE 305 SPARTANBURG, SC 29306		
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip		Zip		Country	
01132006 Chg-P CR2E034 (11/05) 4. FEI Number 57-0276334 ☐ Applied For ☐ Not Applicable					
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required					
6. Name and Address of Current Registered Agent			7. Name and Address of New Registered Agent		
C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324			Name Street Address (P.O. Box Number is Not Acceptable) City		
			FL Zip Code		
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 _____ (NOTE: Registered Agent signature required when reinstating) _____ DATE _____					
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00		9. Election Campaign Financing ☐ \$5.00 May Be Added to Fees			
10. OFFICERS AND DIRECTORS					
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D MOSS, BEVERLY S 7147 RAMSGATE RD CHARLOTTE, NC 28270	☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	SD Russell R. Weber 389 Hidden Creek Circle Spartanburg, S.C. 29306	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D SMITH, HENRY D 4650 INDUSTRIAL DR. SPRINGFIELD, IL 62703	☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	D Wade C. Crow 430 E. Main St. Spartanburg, S.C. 29302	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	STD WILSON, JAMES C JR 101 W. ST. JOHN ST., SUITE 305 SPARTANBURG, SC 29306	☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	TD James C. Wilson, Jr. 101 W. St. John St., Suite 305 Spartanburg, S.C. 29306	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PVCD COUCH, KEN 9098 FAIRFOREST RD. SPARTANBURG, SC 29301	☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	D Billie E. Shelley 1049 Woodburn Rd. Spartanburg, S.C. 29302	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D BROOKS, BERNARD E 204 ASHWICK COURT SPARTANBURG, SC 29301	☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	D Timothy L. Cleveland 400 E. Henry St. Spartanburg, S.C. 29302	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	CD COBB, BILL 201 W. ST. JOHN ST. SPARTANBURG, SC 29306	☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	D L. Terrell Sovey 367 S. Pine St. Spartanburg, S.C. 29302	☐ Change ☒ Addition
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: <u>James C. Wilson, Jr.</u> James C. Wilson, Jr. Treasurer <u>01/18/06</u> <u>864-542-9419</u>					
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR _____ Date _____ Daytime Phone # _____					