

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F98000006039

Entity Name: J. SMITH LANIER & CO.

FILED  
Jan 15, 2009  
Secretary of State

**Current Principal Place of Business:**

300 WEST TENTH STREET  
WEST POINT, GA 31833 US

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 70  
WEST POINT, GA 31833 US

**New Mailing Address:**

FEI Number: 58-1513334      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

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: D ( ) Delete  
Name: LANIER, D. GAINES  
Address: 300 W. TENTH  
City-St-Zip: WEST POINT, GA 31833 US

Title: DP ( ) Delete  
Name: IVEY, GARY  
Address: 1413 SUNSET DR  
City-St-Zip: SIGNAL MOUNTAIN, TN 37377 US

Title: DST ( ) Delete  
Name: PLAN, FRANK E  
Address: 1533 LAKEWOOD PL  
City-St-Zip: AUBURN, AL 36830 US

Title: D ( ) Delete  
Name: LANIER II, SMITH J  
Address: 2024 N 18TH ST  
City-St-Zip: LANETT, AL 36863 US

Title: DVP ( ) Delete  
Name: PARR JR., WILLIAM T  
Address: 1101 4TH AVE  
City-St-Zip: WEST POINT, GA 31833 US

**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:

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: FRANK E PLAN

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

CFO

01/15/2009

\_\_\_\_\_ Date