2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# H08665

FILED Jan 12, 2004 Secretary of State

Entity Name: SMITH BUSINESS SERVICES, INC.

Current Principal Place of Business: New Principal Place of Business:

320 W. CERVANTES ST. PENSACOLA, FL 32501

Current Mailing Address: New Mailing Address:

320 W. CERVANTES ST. PENSACOLA, FL 32501

FEI Number: 59-2418194 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

SMITH, BARBARA D
320 W. CERVANTES ST.
PENSACOLA, FL 32501

PINETTE, STEVEN M
320 W. CERVANTES ST.
PENSACOLA, FL 32501

PENSACOLA, FL 32501

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: STEVEN M PINETTE 01/12/2004

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D () Delete Title: PSD (X) Change () Addition Name: SMITH, ROBERT J., Name: SMITH, ROBERT J.

Address: 5605 VESTAVIA LANE Address: 5605 VESTAVIA LANE City-St-Zip: PENSACOLA, FL 32526 City-St-Zip: PENSACOLA, FL 32526

Title: DPT () Delete Title: D (X) Change () Addition Name: SMITH. BARBARA D. Name: SMITH. BARBARA D.

Name:SMITH, BARBARA D.,Name:SMITH, BARBARA D,Address:5605 VESTAVIA LANEAddress:5605 VESTAVIA LANECity-St-Zip:PENSACOLA, FL 32526City-St-Zip:PENSACOLA, FL 32526

Title: D () Delete Title: D (X) Change () Addition

 Name:
 SMITH, JAMES T.,
 Name:
 SMITH, JAMES T.,

 Address:
 6939 CEDAR LAKE DRIVE
 Address:
 6939 CEDAR LAKE DRIVE

 City-St-Zip:
 PENSACOLA, FL 32526
 City-St-Zip:
 PENSACOLA, FL 32526

Title: DVP () Delete Title: DVPT (X) Change () Addition

Name:PINETTE, STEVEName:PINETTE, STEVE MAddress:7300 MIRANDA SUE BLVDAddress:7300 MIRANDA SUE BLVDCity-St-Zip:PENSACOLA, FL 32526City-St-Zip:PENSACOLA, FL 32526

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: ROBERT J SMITH P 01/12/2004