2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# H38455

FILED Apr 29, 2009 Secretary of State

Entity Name: C.B. GOLDSMITH & ASSOCIATES, INC	D.	
Current Principal Place of Business:	New Principal Place of Business:	
13101 56TH CT. N. STE 801 CLEARWATER. FL 33760 US		
Current Mailing Address:	New Mailing Address:	
13101 56TH CT. N. STE 801 CLEARWATER, FL 33760 US		
FEI Number: 59-2521338 FEI Number Applied For ()	FEI Number Not Applicable () Certificate of Status Desi	red ()
Name and Address of Current Registered Agent:	Name and Address of New Registered Agent	:
GOLDSMITH, CHARLES B 13101 56TH CT. N. STE 801 CLEARWATER, FL 337647294 US		
The above named entity submits this statement for the $\ensuremath{\text{p}}$ in the State of Florida.	ourpose of changing its registered office or registered agen	t, or both,
SIGNATURE:		
Electronic Signature of Registered Age	ent Date	
Election Campaign Financing Trust Fund Contribution ().		
OFFICERS AND DIRECTORS:	ADDITIONS/CHANGES TO OFFICERS AND D	IRECTORS
Title: ST () Delete	Title: ST (X) Change () Addition	

13101 56TH COURT NORTH, SUITE 801 13303 US HWY 19 N Address: Address: City-St-Zip: CLEARWATER, FL 337647294 US City-St-Zip: CLEARWATER, FL 33760 US Title: () Delete Title: (X) Change () Addition GOLDSMITH, GLEN R GOLDSMITH, BARBARA Name: Name: 13101 56TH COURT NORTH, SUITE 801 Address: 13303 US HWY 19 N Address: CLEARWATER, FL 337647294 US CLEARWATER, FL 33760 US City-St-Zip: City-St-Zip:

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

Name: Name: WHITCOMB, ROBERT

Address: Address: 13101 56TH COURT NORTH, SUITE 801

City-St-Zip: City-St-Zip: CLEARWATER, FL 33760 US

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: CHARLES B. GOLDSMITH 04/29/2009 ST