

2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 23, 2006 08:00 AM
Secretary of State

DOCUMENT # H51235

1. Entity Name
 DAVID R. SMITH DEVELOPMENT, INC.



Principal Place of Business
 753 BARROW STREET
 CRESTVIEW, FL 32539 US

Mailing Address
 753 BARROW STREET
 CRESTVIEW, FL 32539 US



01182006 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
 59-2538193 Applied For
 Not Applicable

5. Certificate of Status Desired \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

SMITH, DAVID R.
 753 BARROW STREET
 CRESTVIEW, FL 32539

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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

Signature, typed or printed name of registered agent and title if applicable

(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
 Trust Fund Contribution.

\$5.00 May Be
 Added to Fees

100000398501
 01/30/06-80097-013 150.00

10. OFFICERS AND DIRECTORS

TITLE: DPS
 NAME: SMITH, DAVID R.
 STREET ADDRESS: 1030 A HWY 90
 CITY-ST-ZIP: HOLT, FL

TITLE: VPOB
 NAME: GAINER, SANDRA D
 STREET ADDRESS: 753 BARROW STREET
 CITY-ST-ZIP: CRESTVIEW, FL 32539

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 CITY-ST-ZIP

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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 another like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-20-06
 Date

Daytime Phone #