2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# H60820

Entity Name: SMITHER & ASSOCIATES, INC.

FILED Apr 07, 2008 Secretary of State

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

120 E. STATE STREET 313 FAIRWOOD COURT SUITE 105-B OLDSMAR, FL 34677 OLDSMAR, FL 34677

New Mailing Address: Current Mailing Address:

120 E. STATE STREET P.O. BOX 446 SUITE 105-B OLDSMAR, FL 34677 OLDSMAR, FL 34677

FEI Number: 59-2531974 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:

SMITHER, JOHN K SMITHER, JOHN K 120 EAST STATE STREET SUITE 105-B 313 FAIRWOOD COURT OLDSMAR, FL 34677 OLDSMAR, FL 34677

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: JOHN K. SMITHER 04/07/2008

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title:

Name:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Delete Title: (X) Change () Addition SMITHER, JOHN K., SMITHER, JOHN K., Name: 120 EAST STATE STREET SUITE 105-B 313 FAIRWOOD COURT Address:

Address: City-St-Zip: OLDSMAR, FL 34677 City-St-Zip: OLDSMAR, FL 34677

Title: DVP Title: DVP () Delete (X) Change () Addition SMITHER, NANCY C., Name: Name: SMITHER, NANCY C.,

120 EAST STATE STREET SUITE 105-B 313 FAIRWOOD COURT Address: Address: OLDSMAR, FL 34677 City-St-Zip: OLDSMAR, FL 34677 City-St-Zip:

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

SMITHER, DEBRA ANN SMITHER, DEBRA ANN Name: Name: 120 EAST STATE STREET SUITE 105-B 313 FAIRWOOD COURT Address: Address: City-St-Zip: OLDSMAR, FL 34677 City-St-Zip: OLDSMAR, FL 34677

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: JOHN K. SMITHER DP 04/07/2008