

**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jan 29, 2005 08:00 AM
Secretary of State

DOCUMENT # H91084

1. Entity Name
S M N C CORP.



Principal Place of Business
**11 SENECA ROAD
SEA RANCH, FL 33308 US**

Mailing Address
**11 SENECA ROAD
SEA RANCH, FL 33308 US**



01192005 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-2626172

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

**FRANZ, SANDRA J
11 SENECA ROAD
SEA RANCH LAKES, FL 33308**

**DO NOT WRITE
IN THIS SPACE**

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, 2005 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE PD
NAME FRANZ, MANFRED
STREET ADDRESS 11 SENECA ROAD
CITY-ST-ZIP SEA RANCH LAKES, FL 33308

TITLE D
NAME DALE CHARLES S
STREET ADDRESS 414 NE 4 ST
CITY-ST-ZIP FT LAUDERDALE, FL

TITLE DST
NAME FRANZ, SANDRA J.
STREET ADDRESS 11 SENECA ROAD
CITY-ST-ZIP SEA RANCH LAKES, FL 33308

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CITY-ST-ZIP

1100000203458
01/29/05-80030-020 150.00

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify 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 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 all other like empowered.

SIGNATURE:

Sandra J Franz
SANDRA J FRANZ

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Jan 26, 2005
Date

954 786 1714
Daytime Phone #