

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**Feb 15, 2006 8:00 am**  
**Secretary of State**

02-15-2006 90048 047 \*\*\*150.00

**DOCUMENT # J03633**

1. Entity Name

SSMS, INC.



Principal Place of Business

7207 DORCHESTER COURT  
HUDSON FL 34667

Mailing Address

7207 DORCHESTER COURT  
HUDSON FL 34667

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-2701589

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

1st MOORE

CR2E034 (10/05)



6. Name and Address of Current Registered Agent

UTTLEY, DORTHA J  
8619 NEW YORK AVE.  
HUDSON FL 34667

7. Name and Address of New Registered Agent

Name **UTTLEY, Robert A.**

Street Address (P.O. Box Number is Not Acceptable)  
**12803 Willowdale WAY**

**Hudson FL**

City

**FL**

Zip Code  
**34667**

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**

**Make Check Payable to Florida Department of State.**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE SDC ☒ Delete  
NAME UTTLEY, DORTHA J  
STREET ADDRESS 7207 DORCHESTER COURT  
CITY-ST-ZIP HUDSON FL 34667

TITLE DVP ☒ Delete  
NAME KELLY, SCOTT A  
STREET ADDRESS 5519 KENTWOKG AVE  
CITY-ST-ZIP NEW PORT RICHEY FL 34652

TITLE DT ☐ Delete  
NAME UTTLEY, ARNOLD R  
STREET ADDRESS 7207 DORCHESTER COURT  
CITY-ST-ZIP HUDSON FL 34667

TITLE DP ☒ Delete  
NAME UTTLEY, ROBERT A  
STREET ADDRESS 7207 DORCHESTER COURT  
CITY-ST-ZIP HUDSON FL 34667

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE President ☒ Change ☐ Addition  
NAME UTTLEY, Robert A.  
STREET ADDRESS 12803 Willowdale WAY  
CITY-ST-ZIP Hudson, FL 34667

TITLE DVP ☒ Change ☐ Addition  
NAME UTTLEY, DORTHA J  
STREET ADDRESS 12803 Willowdale WAY  
CITY-ST-ZIP Hudson, FL 34667

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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 all other like empowered.

SIGNATURE: **Robert A. Uttley** Robert A. UTTLEY

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-30-6 727-819-9172

Date

Daytime Phone #