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Apr 22 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # J06453 (1)

1. Corporation Name
SMITH GRAPHICS, INC.



Principal Place of Business

~~1525 COLONY COURT~~
PALM HARBOR FL 34683

Mailing Address

~~1525 COLONY COURT~~
PALM HARBOR FL 34683

2. Principal Place of Business

21 104 Old Mill Pond Rd
Suite, Apt. #, etc.

22 City & State
Palm Harbor, FL

23 Zip
34683

24 Country
Pinellas

2a. Mailing Address

26 104 Old Mill Pond Rd
Suite, Apt. #, etc.

27 City & State
Palm Harbor, FL

28 Zip
34683

29 Country
Pinellas

3. Date Incorporated or Qualified

03/27/1986

3a. Date of Last Report

04/24/1996

4. FEI Number

59-2652701

Applied For

Not Applicable

5. Certificate of Status Desired

☐ \$8.75 Additional Fee Required

6. Election Campaign Financing

☐ \$5.00 May Be Added to Fees

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

SMITH, WILLIAM D.
~~1525 COLONY COURT~~
PALM HARBOR FL 34683

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE *[Signature]* (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS

TITLE D
NAME SMITH, WILLIAM D.
STREET ADDRESS ~~1525 COLONY COURT~~
CITY - ST - ZIP PALM HARBOR FL

TITLE DTS
NAME SMITH, MARILYN J.
STREET ADDRESS ~~1525 COLONY COURT~~
CITY - ST - ZIP PALM HARBOR FL

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS 104 OLD MILL POND RD
1.4 CITY - ST - ZIP Palm Harbor, FL 34683

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS 104 Old Mill Pond Rd
2.4 CITY - ST - ZIP Palm Harbor, FL 34683

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY - ST - ZIP

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY - ST - ZIP

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY - ST - ZIP

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY - ST - ZIP

14. I do 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 annual report or supplemental annual 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 12 or Block 13 if changed, or in an attachment with an address.

SIGNATURE: *[Signature]*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/15/97 (813) 447-5837
Date Daytime Phone #

CR2E034 (9/96)