2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 16, 2008 8:00 am
Secretary of State
04-16-2008 90030 033 ***150.00

DOCUMENT # J17868

1. Entity Name
SMITH INSURANCE, INC.

Principal Place of Business
401 S. 25TH STREET
FT. PIERCE, FL 34947-3614

Mailing Address
401 S. 25TH STREET
FT. PIERCE, FL 34947-3614

2. Principal Place of Business - No P.O. Box #

Suite, Apt #, etc.

City & State

Zip | Country

3. Mailing Address

Suite, Apt #, etc.

City & State

Zip | Country

04072008 Chg-P CR2E034 (12/06)

4. FEI Number 59-2617855 ☐ Applied For ☐ Not Applicable

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

6. Name and Address of Current Registered Agent

SMITH, JERRY L., SR.
3645 3RD STREET
VERO BEACH, FL 32968

7. Name and Address of New Registered Agent

Name: MARCUS VAN WINKLE
Street Address: 401 S 25TH ST
FT PIERCE, FL 34947-3614
City: FL Zip Code

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: M Van Winkle (signature) 4-10-8
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, 2008 Fee will be $550.00

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

10. OFFICERS AND DIRECTORS

TITLE	DP	☒ Delete
NAME	SMITH, JERRY L., SR.	
STREET ADDRESS	3645 3RD STREET	
CITY-ST-ZIP	VERO BEACH, FL 32968	
TITLE	D	☒ Delete
NAME	SMITH, MARIANNE F.	
STREET ADDRESS	3645 3RD STREET	
CITY-ST-ZIP	VERO BEACH, FL 32968	
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	D,P	☐ Change ☒ Addition
NAME	MARCUS VAN WINKLE	
STREET ADDRESS	401 S 25TH ST	
CITY-ST-ZIP	FT PIERCE, FL 34947-3614	
TITLE	D	☐ Change ☒ Addition
NAME	THERESA HAMMEL	
STREET ADDRESS	401 S 25TH ST	
CITY-ST-ZIP	FT PIERCE, FL 34947-3614	
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 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 all other like empowered.

SIGNATURE: M Van Winkle (signature) 4-10-8 7724896185
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #