

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# K38002

FILED  
Aug 31, 2007  
Secretary of State

**Entity Name:** SMITH CONSTRUCTION COMPANY OF MARION, LEVY AND ALACHUA COUNTIES, INC.

**Current Principal Place of Business:**

106 NORTHEAST 6TH AVENUE  
WILLISTON, FL 32696

**New Principal Place of Business:**

**Current Mailing Address:**

106 NORTHEAST 6TH AVENUE  
WILLISTON, FL 32696

**New Mailing Address:**

**FEI Number:** 59-2950648

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

SMITH, CEDRICK M., JR.  
106 NORTHEAST 6TH AVENUE  
WILLISTON, FL 32696 US

**Name and Address of New Registered Agent:**

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: D ( ) Delete  
Name: WHITCOMB, CATHERINE  
Address: 569 NE 1ST ST  
City-St-Zip: WILLISTON, FL

Title: V ( ) Delete  
Name: KEMP, WILLIAM,  
Address: 3714 SE 80 ST  
City-St-Zip: OCALA, FL

Title: P ( ) Delete  
Name: SMITH, CEDRICK M JR,  
Address: 106 NE 6TH AVE  
City-St-Zip: WILLISTON, FL 32696

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: D (X) Change ( ) Addition  
Name: WHITCOMB, CATHERINE  
Address: 18225 NW 160TH AVENUE  
City-St-Zip: WILLISTON, FL 32696

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: CATHERINE WHITCOMB

D

08/31/2007

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date