

# 2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# L00000012594

FILED  
Jan 07, 2003  
Secretary of State

**Entity Name:** CRAIG A. SMITH AND ASSOCIATES, LLC

**Current Principal Place of Business:**

1000 WEST MCNAB ROAD, SUITE 200  
POMPANO BEACH, FL 33069

**New Principal Place of Business:**

**Current Mailing Address:**

1000 WEST MCNAB ROAD, SUITE 200  
POMPANO BEACH, FL 33069

**New Mailing Address:**

**FEI Number:** 65-1052708

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

SMITH, STEPHEN C  
1000 WEST MCNAB ROAD, SUITE 200  
POMPANO BEACH, FL 33069 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

**MANAGING MEMBERS/MEMBERS:**

Title: MGRM ( ) Delete  
Name: SMITH, STEPHEN  
Address: 1000 WEST MCNAB ROAD  
City-St-Zip: POMPANO BEACH, FL

Title: MGRM ( ) Delete  
Name: SMITH, CRAIG  
Address: 1000 WEST MCNAB ROAD  
City-St-Zip: POMPANO BEACH, FL

Title: MGRM ( ) Delete  
Name: MILITA, DALE  
Address: 1000 WEST MCNAB ROAD  
City-St-Zip: POMPANO BEACH, FL

Title: MGRM ( ) Delete  
Name: SCHRINER, GENE  
Address: 1000 WEST MCNAB ROAD  
City-St-Zip: POMPANO BEACH, FL

**ADDITIONS/CHANGES:**

Title: MGRM (X) Change ( ) Addition  
Name: SMITH, STEPHEN C  
Address: 1000 WEST MCNAB ROAD, SUITE 200  
City-St-Zip: POMPANO BEACH, FL 33069

Title: MGRM (X) Change ( ) Addition  
Name: SMITH, CRAIG A  
Address: 1000 WEST MCNAB ROAD, SUITE 200  
City-St-Zip: POMPANO BEACH, FL 33069

Title: MGRM (X) Change ( ) Addition  
Name: MILITA, DALE  
Address: 1000 WEST MCNAB ROAD, SUITE 200  
City-St-Zip: POMPANO BEACH, FL 33069

Title: MGRM (X) Change ( ) Addition  
Name: SCHRINER, GENE R  
Address: 1000 WEST MCNAB ROAD, SUITE 200  
City-St-Zip: POMPANO BEACH, FL 33069

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: STEPHEN C. SMITH

MGRM

01/07/2003

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date