


2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

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DOCUMENT # N05000008716	
1. Entity Name THE MR. SMART BIRD FOUNDATION, INC.	

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

07 OCT 17 AM 10:18

Principal Place of Business 5258-12 NORWOOD AVENUE JACKSONVILLE, FL 32208	Mailing Address 5258-12 NORWOOD AVENUE JACKSONVILLE, FL 32208
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2. Principal Place of Business - No P.O. Box #	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip	Country

04242007 Chg-NP CR2E037 (12/06)

4. FEI Number APPLIED FOR 20-3474368	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent JONES, CORY 5258-12 NORWOOD AVENUE JACKSONVILLE, FL 32225
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7. Name and Address of New Registered Agent
Name
Street Address (P.O. Box Number is Not Acceptable)
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 _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent Signature required when reinstating) DATE _____

**Filing Fee is \$61.25
Due by May 1, 2007**

9. Election Campaign Financing
Trust Fund Contribution. ☐

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

**Make check payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP JONES, CORY 5258-12 NORWOOD AVENUE JACKSONVILLE, FL 32208 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP JONES, CHRISTOPHER 5258-12 NORWOOD AVENUE JACKSONVILLE, FL 32208 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PRESIDENT JONES CARLTON 5258-12 NORWOOD AVE 32208 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

B 10/19/07

REINSTATEMENT

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 617, 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: _____

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/25/07 904-764-7745
Date Daytime Phone #

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THE MR. SMART BIRD FOUNDATION, INC.

5258-12 Norwood Avenue * Jacksonville, FL 32208

October 9, 2007

Florida Department of State
Secretary of State
Division of Corporations
P.O. Box 8700
Tallahassee, Florida 32314

RE: Notice of Dissolution or Revocation
The Mr. Smart Bird Foundation, Inc.
Document # N05000008716

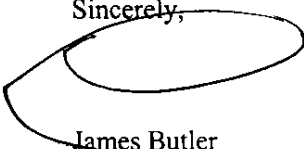
To Whom It May Concern:

Enclosed you will find the 2007 Limited Liability Company Annual Report with the required information that was omitted originally. Also enclosed is a copy of the check where payment for filing fees was made in April 2007.

Be advised that we did not receive a letter from the Department of State advising us of the needed information; thus, we are submitting the completed report with this correspondence. Please cancel the dissolution or revocation of this company and make active upon receipt of the completed report.

If you have any questions, do not hesitate to contact me at (904) 764-7745.

Sincerely,



James Butler
Comptroller

JB/ms

Enclosures

C: Annual Report File