FILED Mar 13, 2006 8:00 am Secretary of State 03-13-2006 90067 010 ****61.25

| 2006 N | OT-FOR-PRO | DFIT COR | PORATION |
|--------|------------|----------|----------|
| | ANNUAL | . REPORT | |
| | | | |

| DOCUMENT # N96000005578 1. Entity Name SMITH DAIRY CENTRAL MAINTENANCE ASSOCIATION, INC. | | | | | | 03-13-: | 2006 9006 | 7 010 *** | **61.25 | |
|---|---|--------------------------------|------------------------|--|----------------------------------|--|-----------------------|----------------|---|---------------------------|
| 4000 SOUTH 57TH AVE. 400 STE. 101 STE | | STE. 101 | 4000 SOUTH 57TH AVE. | | | | | | | |
| 2. Principal Place of Business | | 3. Mailing Address | | | | | | | | |
| Suite, Apt. #, etc. | | Suite, Apt. #, etc. | | | | 01122006 Chg-NP CR2E037 (11/05) | | | | |
| City & State | | City & State | | • • • | | 4. FEI Number 65-0724425 | 5 | | _ | plied For t Applicable |
| Zip | Country | Zip | Cou | ntry | 5. Certificate of Status Desired | | | \$8.75 | | |
| | 6. Name and Address of Current | Registered Agent | [| | | 7. Name and Addre | ss of New R | legistered A | gent | |
| FLATOW | JERRY | | | Name | | | | | | |
| FLATOW, JERRY 4000 SOUTH 57TH AVE. STE. 101 | | | | Street Address (P.O. Box Number is Not Acceptable) | | | | | | |
| LAKE WO | RTH, FL 33463 | | | | | | ··· | | | |
| | | | | City | FL Zip Code | | | | | |
| the obligat | enamed entity submits this statement for tions of registered agent. | r the purpose of changing its | registere | ed office o | r register | ed agent, or both, in t | he State of Fk | orida. I am f | amiliar with, | and accept |
| SIGNATURE | Signature, typed or printed name of registered agent a | and title if applicable. (NOTE | E: Registered | d Agent signal | lure required | when reinstating) | | DATE | . | |
| Filing Fee is \$61.25 Due by May 1, 2006 9. Election Campa Trust Fund Cont | | | | - | | | | | | |
| 10. | OFFICERS AND DIF | | 11. | | | ADDITIONS/CHANGE | S TO OFFICE | RS AND DIF | | |
| NAME STREET ADDRESS CITY-ST-ZIP | PD SARO, ROBERT 7226 BRICKYARD CIRCLE LAKE WORTH, FL 33467 | ☐ Delete | | | | | | | ☐ Change | ☐ Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | VPD PORTER, ELISABETH 6946 BLACKSMITH WAY LAKE WORTH, FL 33467 | Delete | | | PAI 69 | D LAZZO MICHARL 957 STONRY C AERK AICH WORTH, FL. 33 | | | Change | Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | TD MORGAN, SHANE 7083 THUNDER BAY DR. LAKE WORTH, FL 33467 | ☐ Delete | TITLE NAME STREE | | | THE LOOK | 1 H _/ F | <u> </u> | Change | ☐ Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | VPD HARRIS, BERNADATTE 7286 SMITHBROOKE DRIVE LAKE WORTH, FL 33467 | ☐ Delete | | | | | | | ☐ Change | Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | SD YOUNG, KARAN 6790 BLUR BAY CIRCLE LAKE WORTH, FL 33467 | Delete | | | 50 68 4 | RCIO RO 102 BLUB KR WORT | BERT BAYO H, FO | ciacl 1.334 | □ Change | Addition |
| TITLE NAME STREET ADDRESS CHTY-ST-ZIP | certify that the information supplied with | ☐ Delete | CITY | E Et address -st-zip | | | | - | ∟ Change | Addition |

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:

03/03/06 969-2700