2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 27, 2005
Secretary of State

DOCUMENT# N98000004848

Entity Name: BRENDA K. AND VERNON D. SMITH FAMILY FOUNDATION, INC.

Current Principal Place of Business:

3150 N A1A #501N
FT PIERCE, FL 34649 US

New Principal Place of Business:

Current Mailing Address:

3150 N A1A #501N
FT PIERCE, FL 34649 US

New Mailing Address:

FEI Number: 65-0859785 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SMITH, VERNON D
3150 N A1A #501N
FT PIERCE, FL 34649 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

OFFICERS AND DIRECTORS:

Title: D ( ) Delete
Name: SMITH, VERNON D
Address: 3150 N A1A #501N
City-St-Zip: FT PIERCE, FL 34649

Title: D ( ) Delete
Name: SMITH, BRENDA K
Address: 3150 N A1A #501N
City-St-Zip: FT PIERCE, FL 34649

Title: D ( ) Delete
Name: SMITH, CHRISTOPHER D
Address: 1300 SW 9TH STREET
City-St-Zip: VERO BEACH, FL 32962

Title: D ( ) Delete
Name: PETRONE, KATHY
Address: 1309 GREEN COVE ROAD
City-St-Zip: WINTER SPRINGS, FL 32789

Title: D ( ) Delete
Name: ESPLING, KAREN
Address: 5772 NEWBURY CIRCLE
City-St-Zip: MELBOURNE, FL 329401883

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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 for the exemption stated in Section 119.07(3)(i), 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: VERNON D. SMITH RA 04/27/2005

Electronic Signature of Signing Officer or Director Date