

# 2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000020408

**FILED**  
**Apr 11, 2010**  
**Secretary of State**

**Entity Name:** G.A. SMOKE ENTERPRISES, INC.

**Current Principal Place of Business:**

524 W. ALKE DR  
FLORENCE, AL 356304155

**New Principal Place of Business:**

3150 ROBERSON RD.  
FLORENCE, AL 356307616

**Current Mailing Address:**

524 W. ALKE DR  
FLORENCE, AL 356304155

**New Mailing Address:**

3150 ROBERSON RD. #111  
FLORENCE, AL 356307616

**FEI Number:** 91-2026001

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

REHER, DEBORA C  
718 CENTURY LN  
WINTER HAVEN, FL 338818740 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

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

**Title:** PD  
**Name:** SMOKE, GREGARY A  
**Address:** 3150 ROBERSON RD. #111  
**City-St-Zip:** FLORENCE, AL 356307616

**Title:** STD  
**Name:** SMOKE, GINGERY C  
**Address:** 3150 ROBERSON RD. #111  
**City-St-Zip:** FLORENCE, AL 356307616

I hereby 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 all other like empowered.

**SIGNATURE:** GREGARY A. SMOKE

PRES

04/11/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date