

2006 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P00000030777

Entity Name: SMC SYSTEMS, INC.

FILED
Jul 26, 2006
Secretary of State

Current Principal Place of Business:

9570 REGENCY SQUARE BLVD STE 410
JACKSONVILLE, FL 32225

New Principal Place of Business:

Current Mailing Address:

9570 REGENCY SQUARE BLVD STE 410
JACKSONVILLE, FL 32225

New Mailing Address:

FEI Number: 59-3636723

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BUSS, ADAM J
9570 REGENCY SQUARE BLVD STE 410
JACKSONVILLE, FL 32225 US

Name and Address of New Registered Agent:

BUSS, ADAM J
50 N. LAURA STREET
SUITE 2600
JACKSONVILLE, FL 32202 US

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:

07/26/2006

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PRES () Delete
Name: NELSON, EDWIN T
Address: 5028 BLACKHAWK DRIVE
City-St-Zip: JACKSONVILLE, FL 32259

Title: CEO () Delete
Name: UHLAND, CHRISTOPHER
Address: 3815 HUNT CLUB RD.
City-St-Zip: JACKSONVILLE, FL 32224

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: NELSON, EDWIN T
Address: 9570 REGENCY SQUARE BLVD, SUITE 410
City-St-Zip: JACKSONVILLE, FL 32225

Title: CEO (X) Change () Addition
Name: UHLAND, CHRISTOPHER H
Address: 9570 REGENCY SQUARE BLVD, SUITE 410
City-St-Zip: JACKSONVILLE, FL 32225

Title: D () Change (X) Addition
Name: NELSON, EDWIN T
Address: 9570 REGENCY SQUARE BLVD, SUITE 410
City-St-Zip: JACKSONVILLE, FL 32225

Title: D () Change (X) Addition
Name: UHLAND, CHRISTOPHER H
Address: 9570 REGENCY SQUARE BLVD, SUITE 410
City-St-Zip: JACKSONVILLE, FL 32225

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: CHRISTOPHER H. UHLAND

D

07/26/2006

Electronic Signature of Signing Officer or Director

Date