2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Aug 24, 2001 8:00 am
Secretary of State
08-01-2001 90191 015 ***550.00

DOCUMENT # P00000032090

1. Entity Name
S.L. SMITH & ASSOCIATES, INC.

Principal Place of Business	Mailing Address
~~4275 PALMETTO TRAIL~~ ~~WESTON FL 33331~~	~~4275 PALMETTO TRAIL~~ ~~WESTON FL 33331~~

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
341 SAWMILL LANE	341 SAWMILL LANE
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: PONTE VEDRA BEACH, FL	City & State: PONTE VEDRA BEACH, FL
Zip: 32082-4134 Country: USA	Zip: 32082-4134 Country: USA

4. FEI Number: 65-1013822 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ $8.75 Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
SMITH, STANLEY L ~~4275 PALMETTO TRAIL~~ ~~WESTON FL 33331~~	Name: STANLEY L. SMITH Street Address (P.O. Box Number is Not Acceptable) 341 SAWMILL LANE City: PONTE VEDRA BEACH FL Zip Code: 32082-4134

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.

SIGNATURE: STANLEY L. SMITH DATE: 07-25-01
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

FILE NOW!!! FEE IS $550.00
After September 12, 2001 Fee will be $750.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

11. OFFICERS AND DIRECTORS			12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PRESIDENT STANLEY L. SMITH 341 SAWMILL LANE PONTE VEDRA BEACH, FL 32082	☐ Delete		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete		☐ Change ☐ Addition
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TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete		☐ Change ☐ Addition

CR2E034 (5/01)

13. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: SIGNATURE REQUIRED STANLEY L. SMITH 07-25-01 904-280-0317
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #