


**2004 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jul 06, 2004 8:00 am
Secretary of State

07-06-2004 90001 015 ***150.00

DOCUMENT # P00561 1. Entity Name PAUL R. SMITH UNDERWRITING, INC.	
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Principal Place of Business 2240 BELLEAIR ROAD SUITE 160 CLEARWATER, FL 33764 US	Mailing Address 2240 BELLEAIR ROAD SUITE 160 CLEARWATER, FL 33764 US
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54059786



06302004 No Chg-P CR2E034 (10/03)

4. FEI Number 58-1537536	Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent O'CONNOR, PATRICK M ESQ 2240 BELLEAIR ROAD SUITE 160 CLEARWATER, FL 33764

**DO NOT WRITE
IN THIS SPACE**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

**FILE NOW!!! FEE IS \$550.00
Due by September 8, 2004**

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

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PTSD O'CONNOR, PATRICK M 2240 BELLEAIR ROAD, SUITE 160 CLEARWATER, FL 33764
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: PATRICK M O'CONNOR 6/30/04 64
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

Attachment 54059786

PAUL R. SMITH, UNDERWRITING, INC.
2240 Belleair Road, Suite 160
Clearwater, Florida 33764
(727) 539-6800

June 30, 2004
File No.: 2929-0100

Secretary of State
Attn: Reinstatement Department
P. O. Box 6198
Tallahassee, Florida 32314

RE: Paul R. Smith, Underwriting, Inc.
Document # P00561

Dear Sir/Madam:

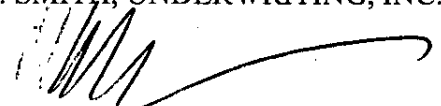
Enclosed please find the 2004 Annual Report and check number 17460 in the amount of \$150.00 which represents the filing fee.

We are asking that you kindly waive the additional \$400.00 fee that is due since we never received the 2004 Annual Report.

Please file at your earliest convenience and if you have any questions please contact the undersigned at (727) 539-6800.

Sincerely,

PAUL R. SMITH, UNDERWRITING, INC.


Patrick M. O'Connor

PMO/psb
Enclosures