


**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED

**Mar 02, 2006 08:00 AM
Secretary of State**

DOCUMENT # P02000024658 1. Entity Name BRIAN SMITH BUILDERS, INC.	
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Principal Place of Business 9730 SW 67TH ST. CEDAR KEY, FL 32625	Mailing Address 9730 SW 67TH ST. CEDAR KEY, FL 32625
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02232006 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 45-0469423	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

8. Name and Address of Current Registered Agent SMITH, BRIAN D 9730 SW 67TH S T. CEDAR KEY, FL 32625
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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 \$150.00 After May 1, 2006 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD SMITH, BRIAN D 9730 SW 67TH S T. CEDAR KEY, FL 32625
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD CANOVA-SMITH, TERESA M 9730 SW 67TH S T. CEDAR KEY, FL 32625
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD CARLISLE, CARLTON A 9730 SW 67TH S T. CEDAR KEY, FL 32625
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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<p>U00000453273 03/14/06-80013-011 150.00</p> <p>DO NOT WRITE IN THIS SPACE</p>
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: Brian D Smith 2/28/06 2159552
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #