

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000098129

FILED
Apr 27, 2008
Secretary of State

Entity Name: SMITHERS BUSINESS INVESTMENTS, INC.

Current Principal Place of Business:

2151 WELLS AVENUE
SARASOTA, FL 34232

New Principal Place of Business:

Current Mailing Address:

2151 WELLS AVENUE
SARASOTA, FL 34232

New Mailing Address:

FEI Number: 22-3870676 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SMITHERS, ROBERT L
2151 WELLS AVENUE
SARASOTA, FL 34232 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: P () Delete
Name: SMITHERS, JASON R
Address: 7236 SHEPHARD STREET
City-St-Zip: SARASOTA, FL 34243

Title: VP () Delete
Name: SMITHERS, ROBERT L
Address: 2151 WELLS AVENUE
City-St-Zip: SARASOTA, FL 34235

Title: VP (X) Delete
Name: GORMAN, MICHAEL D
Address: 3872 NOTTINGHAM CIRCLE
City-St-Zip: SARASOTA, FL 34202

Title: ST () Delete
Name: SMITHERS, ALICE C
Address: 2151 WELLS AVENUE
City-St-Zip: SARASOTA, FL 34232

Title: VP () Delete
Name: JONES, RONALD
Address: 16110 WATERLINE ROAD
City-St-Zip: BRADENTON, FL 34202

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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: ROBERT SMITHERS

VP

04/27/2008

Electronic Signature of Signing Officer or Director

_____ Date