


**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Feb 28, 2007 8:00 am
Secretary of State

02-28-2007 90004 013 ***150.00

DOCUMENT # P03000012961 1. Entity Name PAUL D. SMITH, INC.	
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Principal Place of Business 2413 10TH ST CT. E PALMETTO, FL 34221	Mailing Address PO BOX 190 PALMETTO, FL 34220
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DO NOT WRITE IN THIS SPACE

40020000



02052007 No Chg-P CR2E034 (11/05)

4. FEI Number 04-3731595	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

SMITH, PAUL D.
2413 10TH ST CT. E
PALMETTO, FL 34221

**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: _____ (NOTE: Registered Agent signature required when reinstating) DATE: _____

FILE NOW!!! FEE IS \$150.00 After May 1, 2007 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	P SMITH, PAUL D 2413 10TH ST CT. E PALMETTO, FL 34221
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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:  2/24/07 941 7854471

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #