

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000014316

FILED
Mar 03, 2006
Secretary of State

Entity Name: SMF INVESTMENTS OF OCALA, INC.

Current Principal Place of Business:

104 NE 32ND AVE
OCALA, FL 34470

New Principal Place of Business:

Current Mailing Address:

104 NE 32ND AVE
OCALA, FL 34470

New Mailing Address:

FEI Number: 65-1170545

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FORREST, STEPHEN B
104 NE 32ND AVE
OCALA, FL 34470 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: D () Delete
Name: FORREST, STEPHEN B
Address: 104 NE 32ND AVENUE
City-St-Zip: OCALA, FL 34470

Title: D () Delete
Name: FORREST, MARJORIE E
Address: 104 NE 32ND AVENUE
City-St-Zip: OCALA, FL 34470

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: FORREST, STEPHEN B PRES
Address: 104 NE 32ND AVENUE
City-St-Zip: OCALA, FL 34470

Title: D (X) Change () Addition
Name: FORREST, MARJORIE E SECTY
Address: 104 NE 32ND AVENUE
City-St-Zip: OCALA, FL 34470

I hereby certify that the information supplied with this filing does not qualify for the 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: STEPHEN B. FORREST

PRES

03/03/2006

Electronic Signature of Signing Officer or Director

Date