

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000028265

FILED  
Feb 01, 2004  
Secretary of State

**Entity Name:** TUTEN SMITH INVESTMENTS, INC.

**Current Principal Place of Business:**

6172 ALPENROSE AVE.  
JACKSONVILLE, FL 32256

**New Principal Place of Business:**

5535 SHAD RD.  
JACKSONVILLE, FL 32241

**Current Mailing Address:**

6172 ALPENROSE AVE.  
JACKSONVILLE, FL 32256

**New Mailing Address:**

P.O. BOX 58052  
JACKSONVILLE, FL 32241

**FEI Number:** 05-0558349

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

CARROLL, THOMAS P  
12412 SAN JOSE BLVD  
SUITE 101  
JACKSONVILLE, FL 32223 US

**Name and Address of New Registered Agent:**

SMITH, JASON M V.P.  
6172 ALPEN ROSE AVE  
JACKSONVILLE, FL 32256 US

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:** JASON M. SMITH

02/01/2004

Electronic Signature of Registered Agent

Date

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: TUTEN, CHRISTOPHER  
Address: 12241 GOVERNORS DR. W  
City-St-Zip: JACKSONVILLE, FL 32223

Title: VP ( ) Delete  
Name: SMITH, JASON  
Address: 6172 ALPENROSE AVE.  
City-St-Zip: JACKSONVILLE, FL 32256

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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

Title: T ( ) Change (X) Addition  
Name: SMITH, DAWN D TREASUR  
Address: 6172 ALPEN ROSE AVE.  
City-St-Zip: JACKSONVILLE, FL 32256

I hereby certify that the information supplied with this filing does not qualify for the 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 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:** JASON M. SMITH

VP

02/01/2004

Electronic Signature of Signing Officer or Director

Date