

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P03000031889

**Entity Name:** SMITH STEPS, INC.

**FILED**  
**May 02, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

6944 US HIGHWAY 90 EAST  
LIVE OAK, FL 32064

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 1210  
LIVE OAK, FL 32064

**New Mailing Address:**

**FEI Number:** 14-1875698

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

WARD, LYNN  
9416 141ST DRIVE  
LIVE OAK, FL 32060 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

**OFFICERS AND DIRECTORS:**

Title: PDST  
Name: WARD, LYNN  
Address: 9416 141ST DRIVE  
City-St-Zip: LIVE OAK, FL 32060

I hereby 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 all other like empowered.

SIGNATURE: LYNN WARD

P

05/02/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date