

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000054341

Entity Name: SMILE PRODUCTIONS, INC.

FILED  
Aug 30, 2005  
Secretary of State

## Current Principal Place of Business:

ATTN: NED MCLEOD  
284 PARK AVE NORTH  
WINTER PARK, FL 32789

## Current Mailing Address:

ATTN: NED MCLEOD  
284 PARK AVE NORTH  
WINTER PARK, FL 32789

## New Principal Place of Business:

ATTN: GENTRY L. AKENS, II  
755 STAGE LANE  
LAKE BUENA VISTA, FL 32830

## New Mailing Address:

ATTN: GENTRY L. AKENS, II  
P.O. BOX 22865  
LAKE BUENA VISTA, FL 32830

FEI Number: 20-0764792

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

FLESHER, NANCY R  
229 ALMA ST  
KISSIMMEE, FL 34741 US

## Name and Address of New Registered Agent:

AKENS, GENTRY L II  
8301 ELM PARK DR  
APT.# 629  
ORLANDO, FL 32821 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: GENTRY L. AKENS, II

08/30/2005

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: AKENS, GENTRY L II  
Address: 920 MAXWELL STREET  
City-St-Zip: WINTER PARK, FL 32804

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition  
Name: AKENS, GENTRY L II  
Address: 3801 ELM PARK DR. APT.# 629  
City-St-Zip: ORLANDO, FL 32821 US

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: GENTRY L. AKENS, II

D

08/30/2005

Electronic Signature of Signing Officer or Director

Date