## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P03000066820

Entity Name: SMOOTH MOVE INSTALLATIONS, INC

FILED Apr 19, 2005 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

309 SAWGRASS CT 2731 2ND ST NE NAPLES, FL 34110 NAPLES, FL 34120

Current Mailing Address: New Mailing Address:

 309 SAWGRASS CT
 2731 2ND ST NE

 NAPLES, FL 34110
 NAPLES, FL 34120

FEI Number: 42-1595636 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

KENTON, KIMBERLY J
309 SAWGRASS CT
NAPLES, FL 34110 US
REED, KIMBERLY J
2731 2ND ST NE
NAPLES, FL 34120 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: KIMBERLY J REED 04/19/2005

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P () Delete Title: P (X) Change () Addition

 Name:
 REED, R. SHANE
 Name:
 REED, R. SHANE

 Address:
 309 SAWGRASS CT
 Address:
 2731 2ND ST NE

 City-St-Zip:
 NAPLES, FL 34110
 City-St-Zip:
 NAPLES, FL 34120

Title: S/T () Delete Title: S/T (X) Change () Addition

 Name:
 KENTON, KIMBERLY J
 Name:
 REED, KIMBERLY J

 Address:
 309 SAWGRASS CT
 Address:
 2731 2ND ST NE

 City-St-Zip:
 NAPLES, FL 34110
 City-St-Zip:
 NAPLES, FL 34120

Title: VP ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 REED, REGGIONALD
 Name:

 Address:
 1973 SUN VALLEY ST
 Address:

 City-St-Zip:
 TITUSVILLE, FL 32780
 City-St-Zip:

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: KIMBERLY J REED S/T 04/19/2005