

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000110479

Entity Name: MIKE SMITH SIDING, INC.

FILED  
Apr 25, 2007  
Secretary of State

**Current Principal Place of Business:**

4564 CRAZY HORSE AVE  
MIDDLEBURG, FL 32068

**New Principal Place of Business:**

**Current Mailing Address:**

4564 CRAZY HORSE AVE  
MIDDLEBURG, FL 32068

**New Mailing Address:**

FEI Number: 04-3777441

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

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

SMITH, MICHAEL J  
10555 ALVIN ROAD  
JACKSONVILLE, FL 32222 US

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

SMITH, MICHAEL J  
4564 CRAZY HORSE AVE  
MIDDLEBURG, FL 32068 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: \_\_\_\_\_

Electronic Signature of Registered Agent

04/25/2007

Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: SMITH, MICHAEL J  
Address: 10555 ALVIN ROAD  
City-St-Zip: JACKSONVILLE, FL 32222

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

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

Title: PD (X) Change ( ) Addition  
Name: SMITH, MICHAEL J  
Address: 4564 CRAZY HORSE AVENUE  
City-St-Zip: MIDDLEBURG, FL 32068

Title: VP ( ) Change (X) Addition  
Name: CREEL, JOSEPH L  
Address: 4564 CRAZY HORSE AVENUE  
City-St-Zip: MIDDLEBURG, FL 32068

I hereby certify that the information supplied with this filing does not qualify 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: MICHAEL J. SMITH

Electronic Signature of Signing Officer or Director

PD

04/25/2007

Date