

2005 FOR PROFIT CORPORATION
ANNUAL REPORT

DOCUMENT # P03000124037

1. Entity Name
STEVE SMITH A/C, INC.



FILED
Jan 12, 2005 08:00 AM
Secretary of State

Principal Place of Business
111 STATE AVENUE
HOLLY HILL, FL 32117

Mailing Address
P.O. BOX 250036
HOLLY HILL, FL 32125



01042005 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
86-1087257

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

SMITH, STEVEN E
111 STATE AVENUE
HOLLY HILL, FL 32117

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY- ST- ZIP	PD SMITH, STEVEN E 1410 RIVERSIDE DR. HOLLY HILL, FL 32117
TITLE NAME STREET ADDRESS CITY- ST- ZIP	STD SMITH, SHEILA M 1410 RIVERSIDE DR. HOLLY HILL, FL 32117
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01/12/05-80035-003 150.00

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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: STEVEN E. SMITH 1-10-05 3862557083
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #