

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000127159

Entity Name: DUSTIN F. SMITH, P.A.

FILED  
May 04, 2007  
Secretary of State

## Current Principal Place of Business:

1984 MISSION DR  
NAPLES, FL 34109 US

## New Principal Place of Business:

305 NEPTUNES BIGHT  
NAPLES, FL 34103 US

## Current Mailing Address:

1984 MISSION DR  
NAPLES, FL 34109 US

## New Mailing Address:

305 NEPTUNES BIGHT  
NAPLES, FL 34103 US

FEI Number: 75-3136604

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

LYNN M. CARTER, CPA, PA  
3580 GOLDEN GATE BLVD EAST  
NAPLES, FL 34102 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

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: P,VP ( ) Delete  
Name: SMITH, DUSTIN F  
Address: 1984 MISSION DR  
City-St-Zip: NAPLES, FL 34109 US

Title: S,T ( ) Delete  
Name: SMITH, DUSTIN F  
Address: 1984 MISSION DR  
City-St-Zip: NAPLES, FL 34109 US

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P,VP (X) Change ( ) Addition  
Name: SMITH, DUSTIN F  
Address: 305 NEPTUNES BIGHT  
City-St-Zip: NAPLES, FL 34103 US

Title: S,T (X) Change ( ) Addition  
Name: SMITH, DUSTIN F  
Address: 305 NEPTUNES BIGHT  
City-St-Zip: NAPLES, FL 34103 US

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: DUSTIN F SMITH

P,VP

05/04/2007

Electronic Signature of Signing Officer or Director

Date