

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000137586

FILED  
Apr 25, 2004  
Secretary of State

**Entity Name:** TOD SMITH CARPET INSTALLATIONS, INC.

**Current Principal Place of Business:**

145 SOUTHCOT DR  
CASSELBERRY, FL 32707

**New Principal Place of Business:**

**Current Mailing Address:**

145 SOUTHCOT DR  
CASSELBERRY, FL 32707

**New Mailing Address:**

FEI Number: 20-0449060

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

SMITH, TOD  
145 SOUTHCOT DR  
CASSELBERRY, FL 32707

**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

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: PST ( ) Delete  
Name: SMITH, TOD  
Address: 145 SOUTHCOT DR  
City-St-Zip: CASSELBERRY, FL 32707

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

Title: ( ) Change ( ) Addition  
Name:  
Address:  
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: TOD SMITH

PST

04/25/2004

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date