2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 25, 2005
Secretary of State

DOCUMENT# P03000156575

Entity Name: L.T. SMITH PROPERTIES, INC.

Current Principal Place of Business:

900 KIRBY ST
PALATKA, FL 32177

New Principal Place of Business:

Current Mailing Address:

900 KIRBY ST
PALATKA, FL 32177

New Mailing Address:

FEI Number: 20-0544262 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

LOOSEMORE, RICHARD T
405 E RIVER RD
EAST PALATKA, FL 32131 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

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: D ( ) Delete
Name: RION, ADRIAN T
Address: 6016 2ND MANOR WEST
City-St-Zip: PALATKA, FL 32177

Title: D ( ) Delete
Name: LOOSEMORE, RICHARD T
Address: 405 E RIVER D
City-St-Zip: EAST PALATKA, FL 32131

Title: D ( ) Delete
Name: RODRIGUE, STEVE
Address: 401 E RIVER RD
City-St-Zip: EAST PALATKA, FL 32131

Title: D ( ) Delete
Name: SONCRANT, LARRY W
Address: 108 ROUND LAKE CT
City-St-Zip: PALATKA, FL 32177

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition
Name: RION, ADRIAN T
Address: 233 CRYSTAL COVE
City-St-Zip: PALATKA, FL 32177

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

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: RICHARD LOOSEMORE PRES 04/25/2005

Electronic Signature of Signing Officer or Director — Date