

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P03000157013

**FILED**  
**Apr 11, 2012**  
**Secretary of State**

**Entity Name:** THE BUG SMITH, INC.

**Current Principal Place of Business:**

154 PRAIRIE FALCON DR.  
GROVELAND, FL 34736

**New Principal Place of Business:**

**Current Mailing Address:**

P O BOX 1609  
MINNEOLA, FL 34755

**New Mailing Address:**

**FEI Number:** 45-0531530

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

SMITH, ARTHUR G  
154 PRAIRIE FALCON DR./  
GROVELAND, FL 34736 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

**OFFICERS AND DIRECTORS:**

Title: PD  
Name: SMITH, ARTHUR  
Address: 154 PRAIRIE FALCON DR.  
City-St-Zip: GROVELAND, FL 34736

Title: VD  
Name: SMITH, PATRICIA  
Address: 154 PRAIRIE FALCON DR.  
City-St-Zip: GROVELAND, FL 34736

I hereby 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 all other like empowered.

SIGNATURE: PATRICIA A. SMITH

VP

04/11/2012

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

\_\_\_\_\_  
Date