

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000058258

FILED
Apr 25, 2006
Secretary of State

Entity Name: SMITH & JOHNSON & ASSOCIATES, INC.

Current Principal Place of Business:

1048 STATE ROAD 436
CASSELBERRY, FL 32707

New Principal Place of Business:

1230 REFLECTIONS CIRCLE
#202
CASSELBERRY, FL 32707

Current Mailing Address:

1048 STATE ROAD 436
CASSELBERRY, FL 32707

New Mailing Address:

1230 REFLECTIONS CIRCLE
#202
CASSELBERRY, FL 32707

FEI Number: 20-0980442

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KELLER, TRACEY L
51 RANCH TRAIL ROAD
HAINES CITY, FL 33844 US

Name and Address of New Registered Agent:

KELLER, TRACEY L
1230 REFLECTIONS CIRCLE
#202
CASSELBERRY, FL 32707 US

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:

04/25/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: KELLER, TRACEY L
Address: 51 RANCH TRAIL ROAD
City-St-Zip: HAINES CITY, FL 33844

Title: SEC () Delete
Name: SMITH, PHYLLIS W
Address: 50 RANCH TRAIL ROAD
City-St-Zip: HAINES CITY, FL 33844

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: KELLER, TRACEY L
Address: 1230 REFLECTIONS CIRCLE #202
City-St-Zip: CASSELBERRY, FL 32707

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 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: TRACEY L KELLER

P

04/25/2006

Electronic Signature of Signing Officer or Director

Date