

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000102990

Entity Name: SMITH 1 STUCCO INC.

FILED
Jul 21, 2009
Secretary of State

Current Principal Place of Business:

P O BOX 600907
JACKSONVILLE, FL 32259 US

New Principal Place of Business:

2016 S JIMMY LN
JACKSONVILLE, FL 32259 US

Current Mailing Address:

P O BOX 600907
JACKSONVILLE, FL 32259 US

New Mailing Address:

2016 S JIMMY LN
JACKSONVILLE, FL 32259 US

FEI Number: 20-1340834

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SMITH, POLICARPO
112 EAST BLACKJACK BRANCH WAY
JACKSONVILLE, FL 322591900 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 () Delete
Name: SMITH, POLICARPO
Address: 2016 S JIMMY LN
City-St-Zip: JACKSONVILLE, FL 32259

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 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: POLICARPIO SMITH

P

07/21/2009

Electronic Signature of Signing Officer or Director

Date