

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000033374

FILED  
Apr 03, 2006  
Secretary of State

Entity Name: MAL SMITH, INC.

**Current Principal Place of Business:**

5100 N 9TH AVE  
12A  
PENSACOLA, FL 32504 US

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 4151  
PENSACOLA, FL 32507 US

**New Mailing Address:**

FEI Number: 32-0141773      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

STOKES, PATSY A  
4726 BRIDGEDALE ROAD  
PENSACOLA, FL 32505 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: P ( ) Delete  
Name: SMITH, ANGELA M  
Address: 6272 DEERWOOD DRIVE  
City-St-Zip: MONTGOMERY, AL 36117 US

Title: VP ( ) Delete  
Name: SMITH, MATTHEW R  
Address: 6272 DEERWOOD DRIVE  
City-St-Zip: MONTGOMERY, AL 36117 US

Title: VP ( ) Delete  
Name: STOKES, PATSY  
Address: 4726 BRIDGEDALE ROAD  
City-St-Zip: PENSACOLA, FL 32505

Title: VP ( ) Delete  
Name: STOKES, GEORGE  
Address: 4726 BRIDGEDALE ROAD  
City-St-Zip: PENSACOLA, FL 32505

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

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

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 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: ANGELA SMITH

P

04/03/2006

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date