

# **2010 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P05000135287

Entity Name: SMART HEALTH, INC.

**FILED**  
**Feb 18, 2010**  
**Secretary of State**

**Current Principal Place of Business:**

7649 RICHLAND STREET  
WESLEY CHAPEL, FL 33544 US

**New Principal Place of Business:**

**Current Mailing Address:**

7649 RICHLAND STREET  
WESLEY CHAPEL, FL 33544 US

**New Mailing Address:**

FEI Number: 20-3359068      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

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

HAMILTON, ROBERT G  
7649 RICHLAND STREET  
WESLEY CHAPEL, FL 33544 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  
Name: HAMILTON, ROBERT G CAPT.  
Address: 7649 RICHLAND STREET  
City-St-Zip: WESLEY CHAPEL, FL 33544 US

Title: VP  
Name: HAMILTON, VICTORIA H MRS.  
Address: 7649 RICHLAND STREET  
City-St-Zip: WESLEY CHAPEL, FL 33544 US

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: VICTORIA H HAMILTON

VP

02/18/2010

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

\_\_\_\_\_  
Date