

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000002273

FILED
Apr 10, 2007
Secretary of State

Entity Name: SMITH & ASSOCIATES OF TALLAHASSEE, P.A.

Current Principal Place of Business:

3356 CHARLESTON RD
TALLAHASSEE, FL 32309

New Principal Place of Business:

2873 REMINGTON GREEN CIRCLE
TALLAHASSEE, FL 32308

Current Mailing Address:

3356 CHARLESTON RD
TALLAHASSEE, FL 32309

New Mailing Address:

2873 REMINGTON GREEN CIRCLE
TALLAHASSEE, FL 32308

FEI Number: 16-1745296

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SMITH, GEOFFREY D
3356 CHARLESTON RD
TALLAHASSEE, FL 32309 US

Name and Address of New Registered Agent:

SMITH, GEOFFREY D
2873 REMINGTON GREEN CIRCLE
TALLAHASSEE, FL 32308 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: _____

04/10/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: SMITH, GEOFFREY D
Address: 3356 CHARLESTON RD
City-St-Zip: TALLAHASSEE, FL 32309

Title: D () Delete
Name: HAUSER, SUSAN C
Address: 3356 CHARLESTON RD
City-St-Zip: TALLAHASSEE, FL 32309

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: SMITH, GEOFFREY D
Address: 2873 REMINGTON GREEN CIRCLE
City-St-Zip: TALLAHASSEE, FL 32308

Title: D (X) Change () Addition
Name: SMITH, SUSAN C
Address: 2873 REMINGTON GREEN CIRCLE
City-St-Zip: TALLAHASSEE, FL 32308

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: GEOFFREY D. SMITH

O/D

04/10/2007

Electronic Signature of Signing Officer or Director

Date