

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P06000108189

Entity Name: SMD BUILDERS, INC.

**FILED**  
**May 02, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

600 LONGCREST LN  
ORANGE PARK, FL 32065

**New Principal Place of Business:**

**Current Mailing Address:**

600 LONGCREST LN  
ORANGE PARK, FL 32065

**New Mailing Address:**

FEI Number: 11-3787691

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

DAVIS, CHAD E PRES.  
600 LONGCREST LANE  
ORANGE PARK, FL 32065 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

**OFFICERS AND DIRECTORS:**

Title: PRES  
Name: DAVIS, CHAD  
Address: 600 LONGCREST LN  
City-St-Zip: ORANGE PARK, FL 32065

Title: TRES  
Name: DAVIS, STACY  
Address: 600 LONGCREST LANE  
City-St-Zip: ORANGE PARK, FL 32065 US

Title: VP  
Name: DAVIS, WILLIAM M  
Address: 11056 GREAT WESTERN LANE WEST  
City-St-Zip: JACKSONVILLE, FL 32257 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: CHAD DAVIS

PRES

05/02/2012

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

\_\_\_\_\_  
Date