

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P07000030837

**FILED**  
**Apr 28, 2011**  
**Secretary of State**

**Entity Name:** CHARLES SMITH DRIVEWAY MAINTENANCE, INC.

**Current Principal Place of Business:**

815 NORTH HOMESTEAD  
PMB 254  
HOMESTEAD, FL 33030

**New Principal Place of Business:**

**Current Mailing Address:**

815 NORTH HOMESTEAD  
PMB 254  
HOMESTEAD, FL 33030

**New Mailing Address:**

**FEI Number:** 20-8794170

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

M B ACCOUNTING  
11706 U S HWY 301 N  
THONOTOSASSA, FL 33592 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: DPS  
Name: SMITH, CHARLES BISHOP  
Address: 815 NORTH HOMESTEAD PMB 254  
City-St-Zip: HOMESTEAD, FL 33030

Title: T  
Name: SMITH, HENRY B  
Address: 815 NORTH HOMESTEAD PMB 254  
City-St-Zip: HOMESTEAD, FL 33030

Title: S  
Name: SMITH, CHARLES B  
Address: 815 NORTH HOMESTEAD PMB 254  
City-St-Zip: HOMESTEAD, FL 33030

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: CHARLES SMITH

PRES

04/28/2011

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

\_\_\_\_\_  
Date