

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000073439

FILED
Apr 14, 2009
Secretary of State

Entity Name: SMOKEY LEE ENTERPRISES INC

Current Principal Place of Business:

1170 PARK DRIVE
LABELLE, FL 33935 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 1818
LABELLE, FL 33975 US

New Mailing Address:

FEI Number:

FEI Number Applied For ()

FEI Number Not Applicable (X)

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MCLEOD, JOYCE
1170 PARK DRIVE
LABELLE, FL 33935 US

Name and Address of New Registered Agent:

MCLEOD, JOYCE M DIR
1170 PARK DRIVE
LABELLE, FL 33935 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: JOYCE M MCLEOD

04/14/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: MCLEOD, JOYCE
Address: 1170 PARK DRIVE
City-St-Zip: LABELLE, FL 33935 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DIR (X) Change () Addition
Name: MCLEOD, JOYCE M DIR
Address: 1170 PARK DRIVE
City-St-Zip: LABELLE, FL 33935 US

I hereby certify that the information supplied with this filing does not qualify 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: JOYCE M MCLEOD

DIR

04/14/2009

Electronic Signature of Signing Officer or Director

Date