

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000105642

FILED
Jan 25, 2009
Secretary of State

Entity Name: SMITH COMMERCIAL CONSTRUCTION, INC.

Current Principal Place of Business:

5110 EISENHOWER BLVD, STE 160
TAMPA, FL 33634

New Principal Place of Business:

20646 WILDERNESS LAKE BLVD.
LAND O LAKES, FL 34637

Current Mailing Address:

5110 EISENHOWER BLVD, STE 160
TAMPA, FL 33634

New Mailing Address:

20646 WILDERNESS LAKE BLVD.
LAND O LAKES, FL 34637

FEI Number: 36-1123034

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MARLOWE, MCNABB & STAYTON, P.A.
1560 W CLEVELAND ST
TAMPA, FL 336061807 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: DP () Delete
Name: SMITH, RONALD G
Address: 17123 JOURNEYS END DRIVE
City-St-Zip: ODESSA, FL 33556

Title: DVP (X) Delete
Name: SMITH, MARCUS G
Address: 15605 DUNN'S POND COURT
City-St-Zip: ODESSA, FL 33556

Title: DVP (X) Delete
Name: SMITH, SCOTT A
Address: 3840 SORREL VINE
City-St-Zip: WESLEY CHAPEL, FL 33544

Title: DST () Delete
Name: SMITH, MARLENE M
Address: 17123 JOURNEYS END DRIVE
City-St-Zip: ODESSA, FL 33556

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DPT (X) Change () Addition
Name: SMITH, RONALD G
Address: 17123 JOURNEYS END DRIVE
City-St-Zip: ODESSA, FL 33556

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: DSVP (X) Change () Addition
Name: SMITH, MARLENE M
Address: 17123 JOURNEYS END DRIVE
City-St-Zip: ODESSA, FL 33556

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: RONALD G. SMITH

PRES

01/25/2009

Electronic Signature of Signing Officer or Director

_____ Date