2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 20, 2009
Secretary of State

DOCUMENT# P08000056924

Entity Name: SMITHWELL, INC.

Current Principal Place of Business:

12113 TOPAZ ST.
CLERMONT, FL 34711

New Principal Place of Business:

Current Mailing Address:

12113 TOPAZ ST.
CLERMONT, FL 34711

New Mailing Address:

P.O. BOX 120981
CLERMONT, FL 34712

FEI Number: 26-2694429 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SMITH, ALEX
12113 TOPAZ ST.
CLERMONT, FL 34711 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: P ( ) Delete
Name: SMITH, ALEX
Address: 12113 TOPAZ ST.
City-St-Zip: CLERMONT, FL 34711

Title: VP ( ) Delete
Name: STRAUGH, MICHAEL
Address: 112 ALEXANDRIA AVE.
City-St-Zip: MINNEOLA, FL 34715

Title: S ( ) Delete
Name: SMITH, CHRISTOPHER
Address: 5960 CR 561
City-St-Zip: CLERMONT, FL 34714

Title: D ( ) Delete
Name: CASHWELL, MICHAEL
Address: 9001 OTT WILLIAMS RD.
City-St-Zip: CLERMONT, FL 34711

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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: ALEX SMITH P 01/20/2009

Electronic Signature of Signing Officer or Director — Date