

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00 AMENDED

PROFIT
CORPORATION
ANNUAL REPORT
2001



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
01 NOV 15 AM 9:53

DOCUMENT # P94000035518

1. Corporation Name

Smart Defensive Driving, Inc.

Principal Place of Business

5012 W US Hwy 90
Lake City, FL 32055

Mailing Address

5012 W US Hwy 90
Lake City, FL 32055

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

21 11345 SW Meadowlark Circle

2a. Mailing Address

26 11345 SW Meadowlark Circle

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 City & State

23 Stuart, FL 32055

27 City & State

28 Stuart, FL 32055

Zip

Country

24 34997 25 USA

Zip

Country

29 34997 30 USA

3. Date Incorporated or Qualified

5/11/94

4. FEI Number

59-3244675

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

8. This corporation owes the current year Intangible
Personal Property Tax. ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

Joe B. Fields
5012 W US Hwy 90
Lake City, FL 32055

10. Name and Address of New Registered Agent

81 Name
John E. Bennett
82 Street Address (P.O. Box Number is Not Acceptable)
11345 SW Meadowlark Circle
83
84 City
Stuart, FL 85 Zip Code
34997

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of, Section 607.0506, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

11/13/2001

12. OFFICERS AND DIRECTORS

TITLE D ☒ DELETE

NAME Joe B. Fields
STREET ADDRESS 5012 W US Hwy 90
CITY-ST-ZIP Lake City, FL 32055

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE D ☐ Change ☒ Addition

1.2 NAME John E. Bennett
1.3 STREET ADDRESS 11345 SW Meadowlark Circle
1.4 CITY-ST-ZIP Stuart, FL 34997

2.1 TITLE D ☐ Change ☒ Addition

2.2 NAME Gerrie Fields
2.3 STREET ADDRESS Rte 5, Lake Jeffrey Hwy
2.4 CITY-ST-ZIP Lake City, FL 32055

3.1 TITLE D ☐ Change ☒ Addition

3.2 NAME Joe Fields
3.3 STREET ADDRESS 431 Neptune Drive
3.4 CITY-ST-ZIP Palm Bay, FL 32907

4.1 TITLE D ☐ Change ☒ Addition

4.2 NAME Suzanne Fields
4.3 STREET ADDRESS McFarland Avenue
4.4 CITY-ST-ZIP Lake City, FL 32055

5.1 TITLE ☐ Change ☒ Addition

5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(n), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

11/13/2001 285-6697

CR2E034 (11/98)