

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P94000065701

FILED
Apr 30, 2002 8:00 AM
Secretary of State

Entity Name: LAW OFFICE OF JASON R. SMITH, P.A.

Current Principal Place of Business:

610 WHITEHEAD ST
KEY WEST, FL 33040

New Principal Place of Business:

614 WHITEHEAD ST
SUITE 1
KEY WEST, FL 33040

Current Mailing Address:

3217 PERRI AVENUE
KEY WEST, FL 33040

New Mailing Address:

3217 PEARL AVENUE
KEY WEST, FL 33040

FEI Number: 65-0520641

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SMITH, JASON R
515 WHITEHEAD STREET
KEY WEST, FL 33040 US

Name and Address of New Registered Agent:

SMITH, JASON R
614 WHITEHEAD STREET
SUITE 1
KEY WEST, FL 33040 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:

04/30/2002

Electronic Signature of Registered Agent

Date

This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so (X).

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: SMITH, JASON R
Address: 3217 PEARL DR
City-St-Zip: KEY WEST, FL 33040

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: JASON R. SMITH

PRES

04/30/2002

Electronic Signature of Signing Officer or Director

Date