2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P94000075801

OVIEDO, FL 32765 US

City-St-Zip:

FILED Mar 28, 2004 Secretary of State

Entity Name: JULIE EASON SMITH, P.A. **Current Principal Place of Business: New Principal Place of Business:** 2060 WINTER SPRINGS BOULEVARD OVIEDO, FL 32765 **Current Mailing Address: New Mailing Address:** 2060 WINTER SPRINGS BOULEVARD OVIEDO, FL 32765 US FEI Number: 59-3283464 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: SMITH, JULIE E 1116 DUNCAN DRIVE WINTER SPRINGS, FL 32708 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: Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution (X). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: **PVST** () Delete Title: () Change () Addition Name: SMITH, JULIE E Name: 2060 WINTER SPRINGS BOULEVARD Address: Address: City-St-Zip: OVIEDO, FL 32765 US City-St-Zip: Title: Title: () Change () Addition () Delete Name: SMITH, JULIE E Name: 2060 WINTER SPRINGS BOULEVARD Address: 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: JULIE EASON SMITH **PRES** 03/28/2004