

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P95000027664

Entity Name: LISA SMITHSON & COMPANY

FILED
Apr 25, 2008
Secretary of State

Current Principal Place of Business:

11201 DANKA CIRCLE NORTH
SUITE #120
ST. PETERSBURG, FL 33716

Current Mailing Address:

11201 DANKA CIRCLE NORTH
SUITE #120
ST. PETERSBURG, FL 33716

New Principal Place of Business:

11201 CORPORATE CIRCLE NORTH
SUITE #120
ST. PETERSBURG, FL 33716

New Mailing Address:

11201 CORPORATE CIRCLE NORTH
SUITE #120
ST. PETERSBURG, FL 33716

FEI Number: 59-3309476

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SMITHSON, LISA
11201 DANKA CIRCLE NORTH
SUITE #120
ST. PETERSBURG, FL 33716 US

Name and Address of New Registered Agent:

SMITHSON, LISA
11201 CORPORATE CIRCLE NORTH
SUITE #120
ST. PETERSBURG, FL 33716 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:

04/25/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: SMITHSON, LISA
Address: 11201 DANKA CIRCLE N. #120
City-St-Zip: ST. PETERSBURG, FL 33716

Title: S (X) Delete
Name: WOLFE, JIM
Address: 11201 DANKA CIRCLE N. #120
City-St-Zip: ST. PETERSBURG, FL 33716

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change () Addition
Name: SMITHSON, LISA
Address: 11201 CORPORATE CIRCLE N. #120
City-St-Zip: ST. PETERSBURG, FL 33716

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: LISA SMITHSON

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04/25/2008

Electronic Signature of Signing Officer or Director

Date