

AMENDED

2005 FOR PROFIT CORPORATION
ANNUAL REPORT (3)

DOCUMENT # P95000030188

1. Entity Name

ROGER SMITH REAL ESTATE, INC.



FILED

05 MAR 28 AM 9:11

SECRETARY OF STATE
TALLAHASSEE, FLORIDA
20017802

Principal Place of Business
5300 S. ORANGE AVE.
ORLANDO FL 32809

Mailing Address
5300 S ORANGE AVE
ORLANDO FL 32809

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-3290878

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

SMITH, W. ROGER
5300 SOUTH ORANGE AVE.
5300 S ORANGE AVE
ORLANDO FL 32809

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when re-stating)

DATE

FILE NOW!!!! FEE IS \$150.00

After May 1, 2005 Fee Will Be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE TS
NAME SMITH, RAINEY
STREET ADDRESS 5300 S ORANGE AVE
CITY- ST- ZIP ORLANDO FL 32809 ☒ Delete

TITLE PRESIDENT
NAME W. ROGER SMITH
STREET ADDRESS 5300 S. ORANGE AVE
CITY- ST- ZIP ORLANDO, FL 32809 ☐ Change ☐ Addition

TITLE PVP
NAME SMITH, CODY
STREET ADDRESS 5300 SOUTH ORANGE AVE
CITY- ST- ZIP ORLANDO FL 32809 ☒ Delete

TITLE DIR
NAME W. ROGER SMITH
STREET ADDRESS 5300 S. ORANGE AVE
CITY- ST- ZIP ORLANDO, FL 32809 ☐ Change ☐ Addition

TITLE PVP
NAME SMITH, PENNY
STREET ADDRESS 5300 SOUTH ORANGE AVENUE
CITY- ST- ZIP ORLANDO FL 32809 ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP ☐ Delete

TITLE
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STREET ADDRESS
CITY- ST- ZIP ☐ Change ☐ Addition

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CITY- ST- ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP ☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #