# 2010 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**
**Feb 28, 2010**
**Secretary of State**

DOCUMENT# P96000010781

**Entity Name:** SMOKY MOUNTAIN PIZZA, INC.

**Current Principal Place of Business:**

3342 S WESTSHORE BLVD
TAMPA, FL 33629 US

**New Principal Place of Business:**

**Current Mailing Address:**

3342 SOUTH WESTSHORE BLVD.
TAMPA, FL 33629

**New Mailing Address:**

3342 S WESTSHORE BLVD
TAMPA, FL 33629 US

**FEI Number: 59-3362735** **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

CONOVER, DAVID
5519 LAKE LETA BLVD.
TAMPA, FL 33624 US

**Name and Address of New Registered Agent:**

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 ( ).**

**OFFICERS AND DIRECTORS:**

Title: PD
Name: CONOVER, DAVID
Address: 5519 LAKE LETA BLVD.
City-St-Zip: TAMPA, FL 33624

I hereby 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 all other like empowered.

SIGNATURE: DAVID J. CONOVER PRES 02/28/2010

Electronic Signature of Signing Officer or Director Date