

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT  
CORPORATION  
ANNUAL REPORT  
1999



FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State  
DIVISION OF CORPORATIONS

FILED  
Apr 14, 1999 8:00 am  
Secretary of State

04-14-1999 90214 047 \*\*\*150.00

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DOCUMENT # P96000016071

1. Corporation Name  
SELLSMART, INC.

Principal Place of Business  
3245 W. PEBBLE BEACH COURT  
LECANTO FL 34461

Mailing Address  
3245 W. PEBBLE BEACH COURT  
LECANTO FL 34461

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

02/19/1996

4. FEI Number

59-3444603

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

6. Election Campaign Financing ☐

Trust Fund Contribution

\$5.00 May Be  
Added to Fees

8. This corporation owes the current year Intangible

Personal Property Tax.

☐ Yes ☐ No

2. Principal Place of Business

21 3260 W. KEYIN LANE  
Suite, Apt. #, etc.

22

City & State

23 LECANTO, FL

Zip

24 34460

Country

25 US

2a. Mailing Address

26 P.O. BOX 995  
Suite, Apt. #, etc.

27

City & State

28 LECANTO, FL

Zip

29 34460

Country

30 US

9. Name and Address of Current Registered Agent

NEFF, EDWARD R  
3245 W. PEBBLE BEACH COURT  
LECANTO FL 34461

10. Name and Address of New Registered Agent

81 Name

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

3260 W. KEYIN LANE

83

84 City

LECANTO

FL

85 Zip Code  
34460

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

APRIL 9, 1999

12. OFFICERS AND DIRECTORS

TITLE D ☐ DELETE

NAME NEFF, CHERYL F  
STREET ADDRESS 3245 W. PEBBLE BEACH COURT  
CITY-ST-ZIP LECANTO FL 34461

TITLE D ☐ DELETE

NAME NEFF, EDWARD R  
STREET ADDRESS 3245 W. PEBBLE BEACH COURT  
CITY-ST-ZIP LECANTO FL 34461

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE P ☒ Change ☐ Addition

1.2 NAME  
1.3 STREET ADDRESS 3260 W. KEYIN LANE  
1.4 CITY-ST-ZIP LECANTO, FL 34461

2.1 TITLE S/T ☒ Change ☐ Addition

2.2 NAME  
2.3 STREET ADDRESS 3260 W. KEVIN LANE  
2.4 CITY-ST-ZIP LECANTO, FL 34461

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP

14. 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 annual report or supplemental annual 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 12 or Block 13 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

APRIL 9, 1999

Date

(352) 527-0800

Daytime Phone #

CR2E034 (11/98)