

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P96000040402

Entity Name: NICHOLAS W. SMITH, INC.

**FILED**  
**Jan 25, 2012**  
**Secretary of State**

## **Current Principal Place of Business:**

450 LEE AVE  
SATELLITE BEACH, FL 32937 US

## **New Principal Place of Business:**

1363 HWY A1A  
SATELLITE BEACH, FL 32937 US

## **Current Mailing Address:**

P O BOX 372388  
SATELLITE BEACH, FL 329372388 US

## **New Mailing Address:**

1363 HWY A1A  
SATELLITE BEACH, FL 32937 US

FEI Number: 59-3385264

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

SMITH, NICHOLAS W  
450 LEE AVE  
SATELLITE BEACH, FL 32937 US

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

NEGRI, REBECCA G  
780 BUTTONWOOD DR  
MERRITT ISLAND, FL 32953 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: REBECCA G NEGRI

01/25/2012

Electronic Signature of Registered Agent

Date

## **OFFICERS AND DIRECTORS:**

Title: D  
Name: SMITH, NICHOLAS W  
Address: 1363 HWY A1A  
City-St-Zip: SATELLITE BEACH, FL 32937

Title: VP  
Name: SMITH, LINDA J  
Address: 1363 HWY A1A  
City-St-Zip: SATELLITE BEACH, FL 32937

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: NICHOLAS W SMITH

PRES

01/25/2012

Electronic Signature of Signing Officer or Director

Date