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

CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

96000074599 1. Corporation Name

SMCF INC

Principal Place of Business 4806 26th St. W. 34207 Bradenton, FL

Mailing Address 4806 26th St. W

Bradenton, FL 34297

FILED May 13, 1999 8:00 am Secretary of State

05-13-1999 90047 045 ***150.00

						DO NOT WRITE IN THIS SPACE		
						3. Date Incorporated or Qualifed		
2.	Principal Place of Business	2a. Mailing Addres	s			4. FEI Number		Applied For
21		26				65-0693908		Not Applicable
22	Suite, Apt. #, etc.	Suite, Apt. #, et	dc.			5. Certifcate of Status Desired	• •	75 Additional e Required
23	City & State	City & State				6. Election Campaign Financing Trust Fund Contribution		.00 May Be ded to Fees
24	Zip Country	Zip 29	30	intry		This corporation owes the current year Personal Property Tax.	Intangible	⊠No
	9. Name and Address of Current	Registered Agent				10. Name and Address of New Registers	d Agent	
	Howard Womeldorph, Jr., CPA 6489 Parkland Drive			81	Name			
				82	Street Address (P.O. Box Number is Not Acceptable)			
	Sarasota, FL 34243			83				
				84	City	F	L 85	Zip Code
11	. Pursuant to the provisions of Sections 607.0502	and 607.1508, Elerida	Statutes, the a	bove	-named corpo	pration submits this statement for the purpose	of changin	g its registered

office or registered agent, or both, in the State of Florida Saction 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		HOWARD W.	
		OTE: Registered Agent signature rec	<u> </u>
12.	OFFICERS AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	D Molly Citera DELETE	1.1 TITLE	Teresa Monahan □Change 🛛 Addit
NAME	3205 York Dr. W.	1.2 NAME	3216 York Drive West
STREET ADDRESS		1.3 STREET ADDRESS	Bradenton, FL 34203
CITY-ST-ZIP	Bradeneon, 11 34205	1.4 CITY-ST-ZIP	bradenton, FL 34203
TITLE	G1 DELETE	2.1 TITLE	Change Addit
NAME	Sharon Faulkner	2.2 NAME	
STREET ADDRESS	5014 Woodlawn Cir W.	2.3 STREET ADDRESS	
CITY-ST-ZIP	Palmetto, FL 34221-853	2.4 CITY-ST-ZIP	
TITLE	DELETE	3.1 TITLE	Change Addit
NAME		3.2 NAME	
STREET ADDRESS	5	3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4. CITY-ST-ZIP	
TITLE	DELETE	4.1 TITLE	Change Addit
NAME		4 2 NAME	
STREET ADDRESS	S	4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	☐ DELETE	5.1 TITLE	☐ Change ☐ Additi
NAME		52 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP	i	54 CITY-ST-ZIP	
TITLE	☐ DELETE	6.1 TITLE	☐ Change ☐ Additi
NAME		6.2 NAME	
STREET ADDRESS	5	6.3 STREET ADDRESS	
CITY-ST-ZIP		64 CITY-ST-ZIP	in Costine 110 07(2V) Flerida Statutas Lifethar partiful that the information

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:

Molly Citera 04/28/99

Daytime Phone #

CR2E034 (11/98)