2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000076283

Address:

City-St-Zip:

Entity Name: HENRY E. SMOAK, III, M.D., P.A.

INDIAN ROCKS BEACH, FL 33785

FILED Apr 06, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business: ONE 19TH AVENUE #4 INDIAN ROCKS BEACH, FL 33785 LIS **Current Mailing Address: New Mailing Address:** ONE 19TH AVENUE #4 INDIAN ROCKS BEACH, FL 33785 US FEI Number: 59-3425190 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: LAMBRECHT, WILLIAM G 200 SOUTH ÓRANGE AVENUE SARASOTA, FL 34236 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: Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: () Change () Addition SMOAK, HENRY E Name: Name: ONE 19TH AVE, #4 Address: Address: City-St-Zip: INDIAN ROCKS BEACH, FL 33785 City-St-Zip: Title: Title: () Change () Addition () Delete Name: SMOAK, KERRI Name: ONE 19TH AVE, #4 Address:

City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: HENRY E SMOAK **PRES** 04/06/2007