2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000101318

Entity Name: SMITH & SONS DEV. & MGMT. CORP.

FILED Jun 15, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

1160 SW CHAPMAN 6021 SE LANDINGS WAY

204 PALM CITY, FL 34990 US STUART, FL 34997

Current Mailing Address: New Mailing Address:

P O BOX 518 6021 SE LANDINGS WAY PALM CITY, FL 34990

STUART, FL 34997

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

FEI Number: 65-0833006 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

SMITH, GERALD A SMITH, GERALD A 1160 SW CHAPMAN WAY #204 6021 SE LANDINGS WAY PALM CITY, FL 34990 STUART, FL 34997 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: GERALD A. SMITH 06/15/2009

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: () Delete Title: (X) Change () Addition

SMITH, GERALD A SMITH, GERALD A Name: Name: 1160 SW CHAPMAN WAY #204 6021 SE LANDINGS WAY, #7 Address: Address:

City-St-Zip: PALM CITY, FL 34990 City-St-Zip: STUART, FL 34997

Title: Title: () Delete (X) Change () Addition

Name: SMITH, CONNIE L Name: SMITH, CONNIE L 1160 SW CHAPMAN WAY #204 6021 SE LANDINGS WAY, #7 Address: Address:

STUART, FL 34997

PALM CITY, FL 34990 City-St-Zip: City-St-Zip:

() Delete Title: (X) Change () Addition Title: SMITH, VAUGHN E SMITH, VAUGHN E Name: Name:

6021 SE LANDINGS WAY #7 6021 SE LANDINGS WAY, #7 Address: Address:

City-St-Zip: STUART, FL 34997 City-St-Zip: STUART, FL 34997

Title: () Delete Title: () Change () Addition

SMITH, GERAUD B Name: Name: Address: 878 E PORTLAND AVE Address: City-St-Zip: FRESNO, CA 93720 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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: CONNIE L. SMITH SEC 06/15/2009