

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000011772

FILED
Jan 05, 2009
Secretary of State

Entity Name: SMITH & LILES, P.A.

Current Principal Place of Business:

714 N SPRING ST
PENSACOLA, FL 32501 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 1713
PENSACOLA, FL 32591 US

New Mailing Address:

FEI Number: 59-3428361 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SMITH, T. RHETT
283 DEAN RD.
PENSACOLA, FL 32503 US

Name and Address of New Registered Agent:

SMITH, T. RHETT
15 W. DESOTO DR.
PENSACOLA, FL 32501 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: T. RHETT SMITH

01/05/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: SMITH, T. RHETT
Address: 15 WEST DESOTO
City-St-Zip: PENSACOLA, FL 32503

Title: DVTS () Delete
Name: LILES, TERESA E
Address: 15 WEST DESOTO
City-St-Zip: PENSACOLA, FL 32501

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
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: TERESA E. LILES

DVTS

01/05/2009

Electronic Signature of Signing Officer or Director

Date