## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P97000100741

Entity Name: FORRESTER-SMITH, INC.

FILED Jan 25, 2005 Secretary of State

Name and Address of Current Registered Agent:  JOHN, GARDNER W 128 WEST ROBERTSON ST. BRANDON, FL 33511 US  The above named entity submits this statement for the purpose of changing its registered office or registing the state of Florida.  SIGNATURE:  Electronic Signature of Registered Agent  Dat  Election Campaign Financing Trust Fund Contribution ( ).  OFFICERS AND DIRECTORS:  ADDITIONS/CHANGES TO OFFICE  Title: P ( ) Delete Title: ( ) Change ( ) A Name: Address: 5306 PINEROCKLANDS AVE Address: City-St-Zip: LITHIA, FL 33547  Title: V ( ) Delete Title: ( ) Change ( ) A Name: HUGHES, BETSEY Name: HUGHES, DOROTHY Name: HUGHES, JAMES Name: Address: City-St-Zip: LITHIA, FL 33547  Title: T ( ) Delete Title: ( ) Change ( ) A Name: Address: City-St-Zip: LITHIA, FL 33547  Title: T ( ) Delete Title: ( ) Change ( ) A Name: Address: City-St-Zip: LITHIA, FL 33547  Title: T ( ) Delete Title: ( ) Change ( ) A Name: Address: City-St-Zip: LITHIA, FL 33547  Title: T ( ) Delete Title: ( ) Change ( ) A Name: Address: City-St-Zip: LITHIA, FL 33547  Title: D ( ) Delete Title: ( ) Change ( ) A Name: Address: City-St-Zip: LITHIA, FL 33547	
P.O. BOX 2540 BRANDON, FL 33509  FEI Number: 59-3490150 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Name and Address of Current Registered Agent:  JOHN, GARDNER W 128 WEST ROBERTSON ST. BRANDON, FL 33511 US  The above named entity submits this statement for the purpose of changing its registered office or regist in the State of Florida.  SIGNATURE:    Electronic Signature of Registered Agent   Dat	
BRANDON, FL 33509  FEI Number: 59-3490150 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Name and Address of Current Registered Agent:  Name and Address of New Registered Agent:  JOHN, GARDNER W  128 WEST ROBERTSON ST. BRANDON, FL 33511 US  The above named entity submits this statement for the purpose of changing its registered office or registing the State of Florida.  SIGNATURE:    Electronic Signature of Registered Agent	
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JOHN, GARDNER W 128 WEST ROBERTSON ST. BRANDON, FL 33511 US  The above named entity submits this statement for the purpose of changing its registered office or regis in the State of Florida.  SIGNATURE:    Electronic Signature of Registered Agent   Dat	f Status Desired ( )
128 WEST ROBERTSON ST. BRANDON, FL 33511 US  The above named entity submits this statement for the purpose of changing its registered office or regis in the State of Florida.  SIGNATURE:    Electronic Signature of Registered Agent   Dat	red Agent:
in the State of Florida.    SIGNATURE:	
Electronic Signature of Registered Agent	tered agent, or both,
Election Campaign Financing Trust Fund Contribution ( ).  OFFICERS AND DIRECTORS:  Title: P ( ) Delete Title: ( ) Change ( ) A Name: Address: 5306 PINEROCKLANDS AVE City-St-Zip: LITHIA, FL 33547  Title: V ( ) Delete Title: ( ) Change ( ) A Name: Address: 3840 GLENCOE DR Address: Oity-St-Zip: BIRMINGHAM, AL 35213  Title: S ( ) Delete Title: ( ) Change ( ) A Name: Address: City-St-Zip: Delete Title: ( ) Change ( ) A Name: HUGHES, DOROTHY	
Title: P () Delete Title: () Change () A Name: HUGHES, H. WINGFIELD Name: HUGHES, H. WINGFIELD Name: Address: 5306 PINEROCKLANDS AVE City-St-Zip: LITHIA, FL 33547 City-St-Zip: LITHIA, FL 33547 City-St-Zip: City-St-Zip: City-St-Zip: Delete Title: () Change () A Name: HUGHES, BETSEY Name: Address: 3840 GLENCOE DR Address: City-St-Zip: BIRMINGHAM, AL 35213 City-St-Zip: City-St-Zip: City-St-Zip: City-St-Zip: City-St-Zip: Title: S () Delete Title: () Change () A Name: HUGHES, DOROTHY Name: Address: City-St-Zip: LITHIA, FL 33547 City-St-Zip: City-St-Zip: City-St-Zip: Title: T () Delete Title: () Change () A Name: HUGHES, JAMES Name: HUGHES, JAMES Name: Address: 60 WEST POMFRET Address: City-St-Zip: CARLISLE, PA 17013 City-St-Zip: City-St-Zip: City-St-Zip: City-St-Zip: Title: D () Delete Title: () Change () A Name: MOSHER, SUSAN Name:	Э
Title: P () Delete Title: () Change () A Address: 5306 PINEROCKLANDS AVE Address: City-St-Zip: LITHIA, FL 33547 City-St-Zip: LITHIA, FL 33547 City-St-Zip: City-St-Zip: Delete Title: () Change () A Address: City-St-Zip: BIRMINGHAM, AL 35213 City-St-Zip: City-St-Zip: Title: S () Delete Title: () Change () A Address: City-St-Zip: BIRMINGHAM, AL 35213 City-St-Zip: City-St-Zip: City-St-Zip: Title: S () Delete Title: () Change () A Address: City-St-Zip: LITHIA, FL 33547 City-St-Zip: City	
Name:         HUGHES, H. WINGFIELD         Name:           Address:         5306 PINEROCKLANDS AVE         Address:           City-St-Zip:         LITHIA, FL 33547         City-St-Zip:           Title:         V () Delete         Title: () Change () A           Name:         HUGHES, BETSEY         Name:           Address:         3840 GLENCOE DR         Address:           City-St-Zip:         BIRMINGHAM, AL 35213         City-St-Zip:           Title:         S () Delete         Title: () Change () A           Name:         HUGHES, DOROTHY         Name:           Address:         5306 PINEROCKLANDS AVE         Address:           City-St-Zip:         LITHIA, FL 33547         City-St-Zip:           Title:         T () Delete         Title: () Change () A           Name:         HUGHES, JAMES         Name:           Address:         60 WEST POMFRET         Address:           City-St-Zip:         CARLISLE, PA 17013         City-St-Zip:           Title:         D () Delete         Title: () Change () A           Name:         MOSHER, SUSAN         Name:	RS AND DIRECTORS
Name:         HUGHES, BETSEY         Name:           Address:         3840 GLENCOE DR         Address:           City-St-Zip:         BIRMINGHAM, AL 35213         City-St-Zip:           Title:         S         ( ) Delete         Title:         ( ) Change ( ) A           Name:         HUGHES, DOROTHY         Name:         Address:         City-St-Zip:           Address:         5306 PINEROCKLANDS AVE         Address:         City-St-Zip:           City-St-Zip:         LITHIA, FL 33547         City-St-Zip:         ( ) Change ( ) A           Name:         HUGHES, JAMES         Name:         Address:           Address:         60 WEST POMFRET         Address:         City-St-Zip:           City-St-Zip:         CARLISLE, PA 17013         City-St-Zip:         ( ) Change ( ) A           Name:         MOSHER, SUSAN         Name:         Name:	ddition
Name:         HUGHES, DOROTHY         Name:           Address:         5306 PINEROCKLANDS AVE         Address:           City-St-Zip:         LITHIA, FL 33547         City-St-Zip:           Title:         T () Delete         Title: () Change () A           Name:         HUGHES, JAMES         Name:           Address:         60 WEST POMFRET         Address:           City-St-Zip:         CARLISLE, PA 17013         City-St-Zip:           Title:         D () Delete         Title: () Change () A           Name:         MOSHER, SUSAN         Name:	ddition
Name:         HUGHES, JAMES         Name:           Address:         60 WEST POMFRET         Address:           City-St-Zip:         CARLISLE, PA 17013         City-St-Zip:           Title:         D () Delete         Title: () Change () A           Name:         MOSHER, SUSAN         Name:	ddition
Name: MOSHER, SUSAN Name:	ddition
Address: 3707 KINGS FORD PLACE Address: City-St-Zip: VALRICO, FL 33594 City-St-Zip:	ddition
Title: D ( ) Delete Title: ( ) Change ( ) A Name: HELDRETH, JAMES Name: Address: 6401 MARBELLA BLVD. Address: City-St-Zip: APOLLO BEACH, FL 33572 City-St-Zip:	ddition

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: H. WINGFIELD HUGHES

P 01/25/2005