

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

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P98000085933

1. Corporation Name
GREG SMITH, INC.

Principal Place of Business
355 SPOONBILL LANE
MELBOURNE BEACH FL 32951

Mailing Address
355 SPOONBILL LANE
MELBOURNE BEACH FL 32951

FILED
Jul 14, 1999 8:00 am
Secretary of State

07-14-1999 90016 001 ****50.00

07-14-1999 90016 002 ****500.00



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

10/05/1998

4. FEI Number

59-3537655

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

8. This corporation owes the current year Intangible
Personal Property Tax.

☐

Yes

No

2. Principal Place of Business

21 Suite, Apt. #, etc.

23 City & State

24 Zip

Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

Country

9. Name and Address of Current Registered Agent

BALDWIN, KEVIN
355 SPOONBILL LANE
MELBOURNE BEACH FL 32951

Delete

10. Name and Address of New Registered Agent

81 Name

LORI LINN Smith

82 Street Address (P.O. Box Number is Not Acceptable)

355 SPOONBILL LANE

83

MELBOURNE Bch,

84 City

FLORIDA

FL

85 Zip Code
32951

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change 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 *Lori Linn Smith*

LORI LINN Smith - PRESIDENT

7/7/99

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS

TITLE D.S. ☐ DELETE

NAME SMITH, GREG
STREET ADDRESS 355 SPOONBILL LANE
CITY-ST-ZIP MELBOURNE BEACH FL 32951

TITLE D ☒ DELETE

NAME BALDWIN, KEVIN
STREET ADDRESS 355 SPOONBILL LANE
CITY-ST-ZIP MELBOURNE BEACH FL 32951

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE D.S. ☒ Change ☐ Addition

1.2 NAME Change Greg Smith
1.3 STREET ADDRESS To include (Secretary as well as Director)
1.4 CITY-ST-ZIP ADDRESS SAME

2.1 TITLE D. Pres ☐ Change ☒ Addition

2.2 NAME LORI LINN Smith
2.3 STREET ADDRESS 355 SPOONBILL LANE,
2.4 CITY-ST-ZIP MELBOURNE Bch, FLA. 32951

3.1 TITLE VP ☐ Change ☒ Addition

3.2 NAME SEAN WILLIAMS
3.3 STREET ADDRESS 1321 BRIDGEWATER ST.
3.4 CITY-ST-ZIP MELBOURNE, FLA 32934

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. 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: *Lori Linn Smith* PRESIDENT 7/7/99 407-725-5739

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (11/98)