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

**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Secretary of State DIVISION OF CORPORATIONS

## Apr 06, 1999 8:00 am Secretary of State Katherine Harris

04-06-1999 90083 036 \*\*\*150.00

DOCUMEN  1. Corporation Name	T #	S951	77
STAN SMITH &	ASS(	OCIATES,	INC.

•										
Principal Place	of Business	Mailing Address			_	7	6 18841810 110 18181 BITT 11814 14011	1881 BIOT 010		411 B)B)1 (4P)
2420 ENTERPRISE SUITE 101 CLEARWATER FL US	•	2420 ENTERPRISES RD SUITE 101 CLEARWATER FL 33763-1703 US	3			3.	DO NOT WRITE Date incorporated or Qualifed 11/18/1991	IN THIS S	SPACE	
2. Principal Pla	ce of Business	2a, Mailing Address				4.	FEI Number		Apr	olied For
21		26					59-3100056		Not	Applicable
Suite, Apt. #,	etc.	Suite, Apt. #, etc.				5.	Certifcate of Status Desired		<b>\$8.75</b> A Fee Red	
City & State		- Gity & State	·			6.	Election Campaign Financing	<del></del>	-\$5.00 ·	May Be
23		28					Trust Fund Contribution		Added to	Fees
Zip	Country	Zip	Cou	ntry		8.	This corporation owes the curren			\
24	25	29 3	30				Personal Property Tax.			□No
	9. Name and Address of Current	Registered Agent		81	Name	10.	Name and Address of New Re	gistered A	gent	——————————————————————————————————————
SMITH, STANTON D. 2420 ENTERPRISES RD SUITE 101 CLEARWATER FL 33763			82 Street Address (P.O. Box Number is Not Acceptable)  83  84 City  FL 85 Zip Code							
office or rec	the provisions of Sections 607.0502 istered agent, or both, in the State of familiar with, and accept the obligati	of Florida. Such change was aut	thorized	l by i	the corporation	oration on's bo	n submits this statement for the pu pard of directors. I hereby accept t	rpose of c	hanging its itment as reg	registered pistered
	gnature, typed or printed name of registered agent	and title if applicable. (NOTE: F	Registered	Agen	t signature require			DATE		
12.	OFFICERS AND		13.			/	ADDITIONS/CHANGES TO OFFI	CERS AND		
1 '	PTS	☐ DELETE	1.1 TII	Œ					Change	☐ Addition
	SMITH, STANTON D.		1.2 NA	ME	}					1
	2420 ENTERPRISE RD #101		1.3 ST	REET	ADDRESS					
CITY-ST-ZIP	CLEARWATER FL		1.4 CF		- ZIP					
TITLE	)	☐ DELETE	2.1 TITLE						☐ Change	☐ Addition
NAME :	SMITH, STANTON D.	2.2 N		ME	)					Ì
	2420 ENTERPRISE RD #101		2.3 \$7		ADDRESS					Į
CITY-ST-ZIP	CLEARWATER FL .			TY-\$	T-ZIP					_ <b>_</b>
TITLE	je visike j	☐ DELETE	3.1 TITLE						☐ Change	☐ Addition [
NAME			3.2 N/	WE						
STREET ADDRESS			3.3 ST 3.4. CI		ADDRESS					]
CITY-ST-ZIP TITLE		☐ DELETE	4.1 111		. ="				Change	Addition

6.2 NAME NAME 6.3 STREET ADDRESS STREET ADDRESS 6.4 CITY-ST-ZIP 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.

4. 2 NAME 4.3 STREET ADDRESS

5.1 TITLE

5.2 NAME

6.1 TITLE

4.4 CITY-ST-ZIP

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

NAME

TITLE

NAME

TITLE

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

DELETE

DELETE

Change

☐ Change

Addition

☐ Addition