

# 2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# V01044

**FILED**  
**Apr 08, 2010**  
**Secretary of State**

**Entity Name:** ATTORNEY ARTHUR B. SMITH, P.A.

**Current Principal Place of Business:**

915 MIDDLE RIVER DRIVE, SUITE 420  
GALLERIA PROFESSIONAL BULDING  
FT LAUDERDALE, FL 33304

**New Principal Place of Business:**

915 MIDDLE RIVER DRIVE, SUITE 421  
GALLERIA PROFESSIONAL BULDING  
FT LAUDERDALE, FL 33304

**Current Mailing Address:**

915 MIDDLE RIVER DRIVE, SUITE 420  
GALLERIA PROFESSIONAL BULDING  
FT LAUDERDALE, FL 33304

**New Mailing Address:**

915 MIDDLE RIVER DRIVE, SUITE 421  
GALLERIA PROFESSIONAL BULDING  
FT LAUDERDALE, FL 33304

FEI Number: 65-0300897

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

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

SMITH, ARTHUR B  
915 MIDDLE DRIVE, SUITE 420  
GALLERIA PROFESSIONAL BUILDING  
FT LAUDERDALE, FL 33304 US

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

SMITH, ARTHUR B  
915 MIDDLE DRIVE, SUITE 421  
GALLERIA PROFESSIONAL BUILDING  
FT LAUDERDALE, FL 33304 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: \_\_\_\_\_

Electronic Signature of Registered Agent

04/08/2010

Date

Election Campaign Financing Trust Fund Contribution (X).

**OFFICERS AND DIRECTORS:**

Title: D  
Name: SMITH, ARTHUR B  
Address: 915 MIDDLE RIVER DRIVE, SUITE 420  
City-St-Zip: FT LAUDERDALE, FL 33304

I hereby 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 all other like empowered.

SIGNATURE: ARTHUR B. SMITH

D

04/08/2010

Electronic Signature of Signing Officer or Director

Date