## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# V14136

Entity Name: S.M.R.T. OF FLORIDA, INC.

FILED Jan 14, 2009 Secretary of State

Current Principal Place of Business:			New Princ	New Principal Place of Business:		
144 FORE	•	US				
Current Mailing Address:			New Mailir	New Mailing Address:		
P.O. BOX 6 PORTLAND	18 ), ME 04104	US				
FEI Number:	65-0313743	FEI Number Applied For ( ) FEI N	lumber Not Appli	licable ( ) Certificate of Status Desired (X)		
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:						
THOMPSON, ARTHUR P 1540 BAY POINT DRIVE SARASOTA, FL 34236 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.						
SIGNATUR	E:					
	Electronic	Signature of Registered Agent		Date		
Election Campaign Financing Trust Fund Contribution ( ).						
OFFICERS AND DIRECTORS:  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:						
Title: Name: Address: City-St-Zip:	CD ( ) D STEVENS, PAUL : C/O 144 FORE ST PORTLAND, ME (	S	Title: Name: Address: City-St-Zip:	()Change ()Addition		
Title: Name: Address: City-St-Zip:	SD () D HANSEN, JANET I C/O 144 FORE ST PORTLAND, ME	-	Title: Name: Address: City-St-Zip:	() Change () Addition		
Title: Name: Address: City-St-Zip:	D () D JUD, DENNIS V C/O 144 FORE ST PORTLAND, ME	Г	Title: Name: Address: City-St-Zip:	TD (X) Change ( ) Addition BENSON, SCOTT L C/O 144 FORE ST PORTLAND, ME 04101		
Title: Name: Address: City-St-Zip:	D () D THOMPSON, ART C/O 144 FORE ST PORTLAND, ME (	HUR P 「.	Title: Name: Address: City-St-Zip:	()Change ()Addition		
Title: Name: Address: City-St-Zip:	D () D CUNNINGHAM, MI C/O 144 FORE ST PORTLAND, ME	CHAEL A T.	Title: Name: Address: City-St-Zip:	VPD (X) Change ( ) Addition CUNNINGHAM, MICHAEL A C/O 144 FORE ST. PORTLAND, ME 04101		
Title: Name: Address: City-St-Zip:	PD ()D BELKNAP, ELLEN C/O 144 FORE ST PORTLAND, ME	IL T.	Title: Name: Address: City-St-Zip:	()Change ()Addition		

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: ELLEN L. BELKNAP PRES 01/14/2009