

2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N09000007293

Entity Name: SMILEFAITH, INC.

Current Principal Place of Business:

5400 SCHOOL ROAD
NEW PORT RICHEY, FL 34652

Current Mailing Address:

5400 SCHOOL ROAD
NEW PORT RICHEY, FL 34652 US

FEI Number: 80-0453938

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

LANE, TOMMIE
3072 WENTWORTH WAY
TARPON SPRINGS, FL 34688 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

Date

Officer/Director Detail :

Title PD
Name LANE, TOMMIE
Address 5400 SCHOOL ROAD
City-State-Zip: NEW PORT RICHEY FL 34652

Title D
Name PAULES, SHERRI
Address 5400 SCHOOL ROAD
City-State-Zip: NEW PORT RICHEY FL 34652

Title VPD
Name LANE, CHRISTINE
Address 5400 SCHOOL ROAD
City-State-Zip: NEW PORT RICHEY FL 34652

Title DIRECTOR
Name HATTEN, BRENT
Address 5400 SCHOOL ROAD
City-State-Zip: NEW PORT RICHEY FL 34652

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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: SHERRI PAULES

DIRECTOR

07/12/2024

Electronic Signature of Signing Officer/Director Detail

Date