

**2023 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# K56319

**Entity Name:** SMITH BUILDING SPECIALTIES, INC.

**Current Principal Place of Business:**

1503 W 27TH ST  
PANAMA CITY, FL 32405

**Current Mailing Address:**

SMITH BUILDING SPECIALTIES, INC.  
1503 W. 27TH STREET  
PANAMA CITY, FL 32405

**FEI Number:** 59-3029261

**Certificate of Status Desired:** No

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

CAIN, JEFFREY SCOTT  
919 MISSISSIPPI AVE.  
LYNN HAVEN, FL 32444 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:** JEFFREY SCOTT CAIN

01/25/2023

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title DP  
Name SMITH, NORMAN A., JR.  
Address 1118 MISSOURI AVE.  
City-State-Zip: LYNN HAVEN FL 32444

Title ST  
Name SMITH, JOYCE  
Address 1118 MISSOURI AVE.  
City-State-Zip: LYNN HAVEN FL 32444

Title VP  
Name SMITH, NORMAN AIII  
Address 913 MISSISSIPPI AVE.  
City-State-Zip: LYNN HAVEN FL 32444

Title T  
Name CAIN, JEFFREY  
Address 919 MISSISSIPPI AVE.  
City-State-Zip: LYNN HAVEN FL 32444

*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:** BRIAN PAVLUS

ACCOUNTING & FINANCE 01/25/2023  
MANAGER

Electronic Signature of Signing Officer/Director Detail

Date