#### 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: TOD SMITH

City-State-Zip: CASSELBERRY FL 32707

Electronic Signature of Signing Officer/Director Detail

PRESIDENT

04/28/2013

Date

# 2013 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000137586

Entity Name: TOD SMITH CARPET INSTALLATIONS, INC.

### **Current Principal Place of Business:**

220 REFLECTIONS CIRCLE 107 CASSELBERRY, FL 32707

## **Current Mailing Address:**

220 REFLECTIONS CIRCLE 107 CASSELBERRY, FL 32707 US

### FEI Number: 20-0449060

### Name and Address of Current Registered Agent:

SMITH, TOD 220 REFLECTIONS CIRCLE 107 CASSELBERRY, FL 32707 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

Officer/Director Detail :			
Title	PST	Title	TREASURER
Name	SMITH, TOD	Name	SMITH, CASEY A
Address	220 REFLECTIONS CIRCLE - APT 107	Address	220 REFLECTIONS CIRCLE
City-State-Zip:	CASSELBERRY FL 32707	City-State-Zip:	107 CASSELBERRY FL 32707
Title	VP		
Name	SMITH, GLENNA H		
Address	220 REFLECTIONS CIRCLE 107		

Certificate of Status Desired: No

FILED Apr 28, 2013 Secretary of State CC7056001089