

DOCUMENT # F99000005770

1. Entity Name

SMITH HANLEY CONSULTING GROUP, INC.

FILED
Jan 29, 2000 8:00 am
Secretary of State

01-29-2000 90010 004 ***158.75

Principal Place of Business: 107 JOHN STREET SOUTHPORT CT 06490
Mailing Address: 107 JOHN STREET SOUTHPORT CT 06490-1466

2. Principal Place of Business: Suite, Apt. #, etc.
3. Mailing Address: Suite, Apt. #, etc.

City & State: City & State

4. FEI Number: 06-142917
Applied For: Not Applicable

5. Certificate of Status Desired: \$8.75 Additional Fee Required



DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent: SHELLY, KEITH 365 WAY MONT CENTER, SUITE G LAKE MARY FL 32746

7. Name and Address of New Registered Agent: Name: Street Address (P.O. Box Number is Not Acceptable): 1025 Greenwood Boulevard City: Lake Mary FL Zip Code

8. 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: Keith Shelly DATE:

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back)

FILE NOW!!! FEE IS \$150.00 After MAY 1, 2000 Fee will be \$550.00 Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. \$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

Table with 2 columns: TITLE, NAME, STREET ADDRESS, CITY-ST-ZIP. Row 1: P HANLEY, THOMAS 235 CANOE HILL ROAD NEW CANAAN CT 06840. Row 2: T SMITH, BRANT 33 FOXBORO PT ESSEX CT 06426.

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

Table with 2 columns: TITLE, NAME, STREET ADDRESS, CITY-ST-ZIP. Includes checkboxes for Change and Addition.

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Thomas Hanley x SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #