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FEC FORM 1

STATEMENT OF ORGANIZATION

1. NAME OF COMMITTEE (in full) (Check if name is changed) Example: If typing, type over the lines.

12FE4M5

SMOKE FREE DEFENSE POLITICAL ACTION COMMITTEE

ADDRESS (number and street) 133 SOUTH HARBOR DRIVE

(Check if address is changed)

VENICE CITY FL STATE 34285 ZIP CODE

COMMITTEE'S E-MAIL ADDRESS

(Check if address is changed) ERIC@ROBINSONHANKS.COM

Optional Second E-Mail Address

COMMITTEE'S WEB PAGE ADDRESS (URL)

(Check if address is changed)

2. DATE 01 / 23 / 2015

3. FEC IDENTIFICATION NUMBER C

4. IS THIS STATEMENT [X] NEW (N) OR [] AMENDED (A)

I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer ERIC ROBINSON [Signature]

Signature of Treasurer ERIC ROBINSON Date 01 / 27 / 2015

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. §437g. ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS.

PHOTO COPY

Full Name of Designated Agent ERIC ROBINSON

Mailing Address 133 SOUTH HARBOR DRIVE

[Empty address line]

VENICE FL 34285

CITY STATE ZIP CODE

Title or Position Telephone number

9. Banks or Other Depositories: List all banks or other depositories in which the committee deposits funds, holds accounts, rents safety deposit boxes or maintains funds.

Name of Bank, Depository, etc.

SUNTRUST

Mailing Address 200 SOUTH NOKOMIS AVENUE

[Empty address line]

VENICE FL 34285

CITY STATE ZIP CODE

Name of Bank, Depository, etc.

[Empty bank name line]

Mailing Address [Empty address line]

[Empty address line]

[Empty address line]

CITY STATE ZIP CODE

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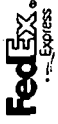
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VENICE, FL 34285

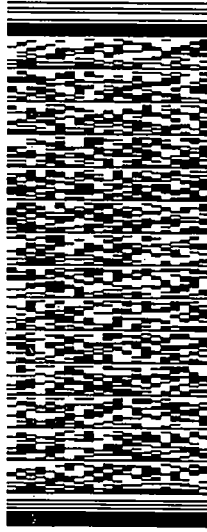
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1/29/15
 DATE PREPARED