2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Feb 01, 2008
Secretary of State

DOCUMENT# L01000001210

Entity Name: CABANISS, SMITH, TOOLE & WIGGINS, PL

Current Principal Place of Business:

485 N KELLER ROAD
#401
MAITLAND, FL 32751

New Principal Place of Business:

Current Mailing Address:

PO BOX 4924
ORLANDO, FL 32802

New Mailing Address:

FEI Number: 59-3693674 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SMITH, LARRY D MGR
485 N KELLER ROAD
SUITE 401
MAITLAND, FL 32751 US

Name and Address of New Registered Agent:

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

MANAGING MEMBERS/MANAGERS:

Title:	MGR	( ) Delete
Name:	CABANISS, RONALD	
Address:	485 N KELLER ROAD, STE 401	
City-St-Zip:	MAITLAND, FL 32751	
Title:	MGR	( ) Delete
Name:	SMITH, LARRY D	
Address:	485 N KELLER ROAD, STE 401	
City-St-Zip:	MAITLAND, FL 32751	
Title:	MGR	( ) Delete
Name:	WIGGINS, MICHAEL J	
Address:	485 N KELLER ROAD, STE 401	
City-St-Zip:	MAITLAND, FL 32751	
Title:	MGR	( ) Delete
Name:	TOOLE, M. GARY	
Address:	485 N KELLER ROAD, STE 401	
City-St-Zip:	MAITLAND, FL 32751	
Title:	MGR	( ) Delete
Name:	SMITH, JOHN W	
Address:	485 N KELLER ROAD, STE 401	
City-St-Zip:	MAITLAND, FL 32751	
Title:	MGR	(X) Delete
Name:	WALLIS, FREDERIC R	
Address:	485 N KELLER ROAD, STE 401	
City-St-Zip:	MAITLAND, FL 32751	

ADDITIONS/CHANGES:

Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: LARRY D. SMITH MGR 02/01/2008

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date