

# 2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000055674

FILED  
Feb 05, 2004  
Secretary of State

Entity Name: SMART-GIBSON FAMILY ENTERPRISES, L.L.C.

**Current Principal Place of Business:**

1223 AIRPORT ROAD  
SUITE 101  
DESTIN, FL 32541

**New Principal Place of Business:**

**Current Mailing Address:**

1223 AIRPORT ROAD  
SUITE 101  
DESTIN, FL 32541

**New Mailing Address:**

FEI Number: 20-0392253      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

HAVENS, JASON E  
1223 AIRPORT ROAD  
SUITE 101  
DESTIN, FL 32541 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/MEMBERS:**

Title: MGR      ( ) Delete  
Name: GIBSON, W. C  
Address: P.O. BOX 208  
City-St-Zip: SAPPHIRE, NC 28774

Title: MGR      ( ) Delete  
Name: EGAN, LINDA G  
Address: 711 PARK LAKE CIRCLE  
City-St-Zip: ORLANDO, FL 32803

Title: MGR      ( ) Delete  
Name: GIBSON, A. R  
Address: 716 SPRING LAKE  
City-St-Zip: DESTIN, FL 32541

Title: MGR      ( ) Delete  
Name: RISALVATO, THOMAS J  
Address: 348 MIRACLE STRIP PARKWAY  
City-St-Zip: FORT WALTON BEACH, FL 32578

**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:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: W. CRAIG GIBSON

MGR

02/05/2004

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