

**2008 LIMITED LIABILITY COMPANY ANNUAL REPORT**

**FILED**  
**Jan 16, 2008 08:00 AM**  
**Secretary of State**

DOCUMENT # L03000055674  
 1. Entity Name  
 SMART-GIBSON FAMILY ENTERPRISES, L.L.C.



Principal Place of Business  
 711 PARK LAKE CIRCLE  
 ORLANDO, FL 32803

Mailing Address  
 711 PARK LAKE CIRCLE  
 ORLANDO, FL 32803

**DO NOT WRITE IN THIS SPACE**



01142008No Chg-LLC CR2E083 (12/07)

4. FEI Number 20-0511337	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

EGAN, LINDA G  
 711 PARK LAKE CIRCLE  
 ORLANDO, FL 32803

**DO NOT WRITE IN THIS SPACE**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE: Linda G. Egan DATE: 1-14-08

Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when renewing)

**FILE NOW!!! FEE IS \$138.75**  
**After May 1, 2008 Fee will be \$538.75**

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR GIBSON, W. C P.O. BOX 208 SAPPHIRE, NC 28774
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR EGAN, LINDA G 711 PARK LAKE CIRCLE ORLANDO, FL 32803
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR GIBSON, A. R PO BOX 5501 DESTIN, FL 32541
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR RISALVATO, THOMAS J 151 MARY ESTHER BLVD STE 301 MARY ESTHER, FL 32569
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

000000786302  
 01/17/08-80035-007 138.75

**DO NOT WRITE IN THIS SPACE**

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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: Linda G. Egan Date: 1-14-08 Daytime Phone #: 407-898-1063

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE