

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000049023

Entity Name: PAMPLIN & SMITH, LLC

FILED
Feb 11, 2007
Secretary of State

Current Principal Place of Business:

785 NORTH SHORE DRIVE
ANNA MARIA, FL 34216

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 1176
ANNA MARIA, FL 34216

New Mailing Address:

FEI Number: 59-2063658

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SMITH, MICHAEL J
785 NORTH SHORE DRIVE
ANNA MARIA, FL 34216 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: MGRM () Delete
Name: SMITH, MICHAEL J
Address: 785 NORTH SHORE DRIVE
City-St-Zip: ANNA MARIA, FL 34216

Title: MGRM () Delete
Name: SMITH, JANICE P
Address: 785 NORTH SHORE DRIVE
City-St-Zip: ANNA MARIA, FL 34216

Title: MGRM () Delete
Name: PAMPLIN OF BRADENTON, PARTNERSHIP L P
Address: 154 AVENUE H., SE
City-St-Zip: WINTER HAVEN, FL 33880

ADDITIONS/CHANGES:

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

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

Title: MGRM (X) Change () Addition
Name: PAMPLIN OF BRADENTON, PARTNERSHIP L P
Address: 785 NORTH SHORE DRIVE
City-St-Zip: ANNA MARIA, FL 34216

I hereby certify that the information supplied with this filing does not qualify for the 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: MICHAEL J SMITH

MGR/

02/11/2007

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