## 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

## DOCUMENT# M04000000400

Entity Name: SMP MARKETING, LLC

FILED Jan 16, 2006 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

143 AIRPORT RD 6820 M-14

GREENFIELD, TN 38230 EAU CLAIRE, MI 49111

Current Mailing Address: New Mailing Address:

143 AIRPORT RD 6820 M-140

GREENFIELD, TN 38230 EAU CLAIRE, MI 49111

FEI Number: 01-0726551 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

RAYMOND, JOHN J JR SEEL, GREGORY B

1200 N FEDERAL HWY, STE 420 6820 M-140

BOCA RATON, FL 33432 US EAU CLAIRE, MICHIGAN, FL 49111 US

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: GREGORY SEEL 01/16/2006

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

Title: MGRM ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 SEEL, GREGORY
 Name:

 Address:
 6820 M 140
 Address:

 City-St-Zip:
 EAU CLAIRE, MI 49111
 City-St-Zip:

Title: MGRM ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 PORTER, JACK
 Name:

 Address:
 143 AIRPORT RD
 Address:

 City-St-Zip:
 GREENFIELD, TN 38230
 City-St-Zip:

Title: MGRM ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 PORTER, JOE
 Name:

 Address:
 143 AIRPORT RD
 Address:

 City-St-Zip:
 GREENFIELD, TN 38230
 City-St-Zip:

Title: MGRM ( ) Delete Title: MGRM (X) Change ( ) Addition

 Name:
 PORTER, JEFF
 Name:
 PERKINS, JEFF

 Address:
 143 AIRPORT RD
 Address:
 143 AIRPORT RD

 City-St-Zip:
 GREENFIELD, TN 38230
 City-St-Zip:
 GREENFIELD, TN 38230

Title: MGRM ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 PORTER, JAMES
 Name:

 Address:
 143 AIRPORT RD
 Address:

 City-St-Zip:
 GREENFIELD, TN 38230
 City-St-Zip:

Title: MGRM ( ) Delete Title: ( ) Change ( ) Addition
Name: MOORE RANDALI
Name:

 Name:
 MOORE, RANDALL
 Name:

 Address:
 STATE FARMERS MARKET STALL 44
 Address:

 City-St-Zip:
 THOMASVILLE, GA 31792
 City-St-Zip:

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: JOE PORTER MGRM 01/16/2006