

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M04000000400

FILED  
Jan 14, 2009  
Secretary of State

Entity Name: SMP MARKETING, LLC

**Current Principal Place of Business:**

6820 M-140  
EAU CLAIRE, MI 49111

**New Principal Place of Business:**

**Current Mailing Address:**

6820 M-140  
EAU CLAIRE, MI 49111

**New Mailing Address:**

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

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

RAYMOND, JOHN J JR.  
C/O BUTZEL LONG, PC  
1200 N. FEDERAL HWY.  
BOCA RATON, FL 33432 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: SEEL, GREGORY  
Address: 6820 M 140  
City-St-Zip: EAU CLAIRE, MI 49111

Title: MGRM ( ) Delete  
Name: PORTER, JACK  
Address: 143 AIRPORT RD  
City-St-Zip: GREENFIELD, TN 38230

Title: MGRM ( ) Delete  
Name: PORTER, JOE  
Address: 143 AIRPORT RD  
City-St-Zip: GREENFIELD, TN 38230

Title: MGRM ( ) Delete  
Name: PERKINS, JEFF  
Address: 143 AIRPORT RD  
City-St-Zip: GREENFIELD, TN 38230

Title: MGRM ( ) Delete  
Name: PORTER, JAMES  
Address: 143 AIRPORT RD  
City-St-Zip: GREENFIELD, TN 38230

Title: MGRM ( ) Delete  
Name: MOORE, RANDALL  
Address: STATE FARMERS MARKET STALL 44  
City-St-Zip: THOMASVILLE, GA 31792

**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: GREGORY B SEEL

MM

01/14/2009

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