


**2007 LIMITED LIABILITY COMPANY  
ANNUAL REPORT**

**FILED**  
**Jan 17, 2007 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # L00000004950</b> 1. Entity Name S M T M, L.L.C.	
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Principal Place of Business 440 S. GULFVIEW BLVD. 904N CLEARWATER BEACH, FL 33767	Mailing Address 458 W. BALDWIN P. O. BOX 7 ALPENA, MI 49707
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**DO NOT WRITE IN THIS SPACE**

01052007 No Chg-LLC CR2E083 (11/05)

4. FEI Number 58-2548938	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  SHEAR, ROBERT L 2650 MCCORMICK DRIVE SUITE 130 CLEARWATER, FL 33759	<b>DO NOT WRITE IN THIS SPACE</b>
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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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_


**Filing Fee is \$50.00  
Due by May 1, 2007**

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR WERTH, STEPHEN K 458 W. BALDWIN ALPENA, MI 49707
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01/18/07-80001-008 50.00

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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:**  **STEPHEN K. WERTH** **1/8/07** **989-358-8080**

SIGNATURE AND TYPE OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #