2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L00000010758

Entity Name: THE SMITH GROUP, L.L.C.

FILED Jan 05, 2007 Secretary of State

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

9150 C.R. 13 SOUTH 9201 C.R. 13 SOUTH HASTINGS, FL 32145 9201 C.R. 13 SOUTH HASTINGS, FL 32145

Current Mailing Address: New Mailing Address:

9150 C.R. 13 SOUTH P.O. BOX 359

HASTINGS, FL 32145 HASTINGS, FL 32145

FEI Number: 59-3674275 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:

SMITH, ZANE W 9150 C.R. 13 SOUTH HASTINGS, FL 32145 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:

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

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

 Name:
 SMITH, ZANE W
 Name:

 Address:
 9150 C.R. 13, SOUTH
 Address:

 City-St-Zip:
 HASTINGS, FL 32145
 City-St-Zip:

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

 Name:
 SMITH, ARLIE
 Name:

 Address:
 8200 C.R. 13, SOUTH
 Address:

 City-St-Zip:
 HASTINGS, FL 32145
 City-St-Zip:

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

 Name:
 SMITH, H. WESLEY
 Name:

 Address:
 8770 C.R. 13, SOUTH
 Address:

 City-St-Zip:
 HASTINGS, FL 32145
 City-St-Zip:

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

 Name:
 SMITH, LANCE
 Name:
 SMITH, LANCE

 Address:
 55 NORTH STREET, SUITE C
 Address:
 2032 CROWN DRIVE

 City-St-Zip:
 PRESQUE ISLE, ME 04769
 City-St-Zip:
 ST. AUGUSTINE, FL 32092

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

 Name:
 SMITH, GREG
 Name:

 Address:
 55 NORTH STREET, SUITE C
 Address:

 City-St-Zip:
 PRESQUE ILSE, ME 04769
 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: LANCE A SMITH MGRM 01/05/2007