

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L00000010758

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

FILED  
Jan 14, 2009  
Secretary of State

## Current Principal Place of Business:

9201 C.R. 13 SOUTH  
HASTINGS, FL 32145

## New Principal Place of Business:

## Current Mailing Address:

P.O. BOX 359  
HASTINGS, FL 32145

## New Mailing Address:

FEI Number: 59-3674275

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

SMITH, ZANE W  
9150 C.R. 13 SOUTH  
HASTINGS, FL 32145 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, ZANE W  
Address: 9150 C.R. 13, SOUTH  
City-St-Zip: HASTINGS, FL 32145

Title: MGRM ( ) Delete  
Name: SMITH, ARLIE  
Address: 8200 C.R. 13, SOUTH  
City-St-Zip: HASTINGS, FL 32145

Title: MGRM ( ) Delete  
Name: SMITH, H. WESLEY  
Address: 8770 C.R. 13, SOUTH  
City-St-Zip: HASTINGS, FL 32145

Title: MGRM ( ) Delete  
Name: SMITH, LANCE  
Address: 2032 CROWN DRIVE  
City-St-Zip: ST. AUGUSTINE, FL 32092

Title: MGRM ( ) Delete  
Name: SMITH, GREG  
Address: 55 NORTH STREET, SUITE C  
City-St-Zip: PRESQUE ILSE, ME 04769

## 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: MGRM (X) Change ( ) Addition  
Name: SMITH, LANCE  
Address: 1057 INVERNESS ST  
City-St-Zip: ST. AUGUSTINE, FL 32092

Title: MGRM (X) Change ( ) Addition  
Name: SMITH, GREG  
Address: 99 FORT ROAD STE 1  
City-St-Zip: PRESQUE ILSE, ME 04769

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: ZANE W SMITH

MGRM

01/14/2009

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