2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

DOCUMENT # L01000021370

1. Entity Name SMITHFIELD PLAZA, LLC

Principal Place of Business

853 SE MONTEREY COMMONS BLVD. STUART, FL 34996 Mailing Address

853 SE MONTEREY COMMONS BLVD. STUART, FL 34996

FILED Feb 02, 2005 08:00 AM Secretary of State



01112005 No Chg-LLC

CR2E083 (10/03)

4. FEI Number 03-0377601

Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

KRAMER, ROBERT S 853 SE MONTEREY COMMONS BLVD. STUART, FL 34996

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		III I	HIS SPACE		
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.					
SIGNATU	Signature, typed or printed name of registered agent and title if applicable	(NOTE Registered Agent signature required when reinstating)	DATÉ	 = .	
	Filing Fee is \$50.00 Due by May 1, 2005				
9.	MANAGING MEMBERS/MANAGERS				
TITLE	MGRM				

TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM FOURSOME INVESTORS, LLC 853 MONTEREY COMMONS BLVD. STUART, FL 34996
TITLE NAME	MGRM UP AND DOWN, LLC 22 ISLAND ROAD STUART, FL 34996
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

02/02/05-80087-015 50.00

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11. ! hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 companyor the requirer or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE:

NO TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

1/21/05

(561) 833-733

Daytime Phone #