

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000009454

FILED
Apr 25, 2006
Secretary of State

Entity Name: SMITH PROPERTIES, L.L.C.

Current Principal Place of Business:

8770 C.R. 13 SOUTH
HASTINGS, FL 32145

New Principal Place of Business:

Current Mailing Address:

8770 C.R. 13 SOUTH
HASTINGS, FL 32145

New Mailing Address:

FEI Number: 82-0543183

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SMITH, H. WESLEY
8770 C.R. 13 SOUTH
HASTINGS, FL 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

Title: MGRM () Delete
Name: SMITH, ARLIE J
Address: 9200 C.R. 13 SOUTH
City-St-Zip: HASTINGS, FL

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

Title: MGRM () Delete
Name: SMITH, C. PERRY
Address: PO BOX 742
City-St-Zip: OKEECHOBEE, FL 34973

Title: MGRM () Delete
Name: SMITH, DALE W
Address: PO BOX 742
City-St-Zip: OKEECHOBEE, FL 34973

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:

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: ZANE W SMITH

MGRM

04/25/2006

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