

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L02000009454

**FILED**  
**Apr 24, 2012**  
**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  
**Name:** SMITH, ZANE W  
**Address:** 9150 C.R. 13 SOUTH  
**City-St-Zip:** HASTINGS, FL

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

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

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

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

I hereby 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

MGR

04/24/2012

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