

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000018693

Entity Name: SMA ASSOCIATES, LLC

FILED  
Apr 28, 2009  
Secretary of State

## Current Principal Place of Business:

1671 MOUND STREET  
SARASOTA, FL 34236

## New Principal Place of Business:

5560 BEE RIDGE ROAD  
SUITE 5  
SARASOTA, FL 342331509 US

## Current Mailing Address:

1671 MOUND ST  
SARASOTA, FL 34636

## New Mailing Address:

5560 BEE RIDGE ROAD  
SUITE 5  
SARASOTA, FL 342331509 US

FEI Number: 55-0828816

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

STRAND, BRIAN  
1671 MOUND STREET  
SARASOTA, FL 34236 US

## Name and Address of New Registered Agent:

STRAND, BRIAN  
5560 BEE RIDGE ROAD  
SUITE 5  
SARASOTA, FL 342331509 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: BRIAN D STRAND CPA

04/28/2009

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MANAGERS:

Title: DP ( ) Delete  
Name: HRONCICH, JOHN  
Address: PO BOX 5363  
City-St-Zip: SARASOTA, FL 34277

Title: DVP ( ) Delete  
Name: HRONCICH, NICHOLAS  
Address: PO BOX 5363  
City-St-Zip: SARASOTA, FL 34277

Title: DST ( ) Delete  
Name: HRONCICH, ANTHONY  
Address: PO BOX 5363  
City-St-Zip: SARASOTA, FL 34277

## ADDITIONS/CHANGES:

Title: MGRM (X) Change ( ) Addition  
Name: HRONCICH, JOHN  
Address: PO BOX 5363  
City-St-Zip: SARASOTA, FL 34277

Title: MGRM (X) Change ( ) Addition  
Name: HRONCICH, NICHOLAS  
Address: PO BOX 5363  
City-St-Zip: SARASOTA, FL 34277

Title: MGRM (X) Change ( ) Addition  
Name: HRONCICH, ANTHONY  
Address: PO BOX 5363  
City-St-Zip: SARASOTA, FL 34277

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: NICHOLAS M HRONCICH

MGRM

04/28/2009

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