2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED Jul 09, 2007 8:00 am

ANNVAL NET VN I					Q 4 P Q 4 4				
DOCUMENT # L02000026296 1. Entity Name ROBERT AND NANCY SMITH FAMILY INVESTMENTS I, LLC					Secretary of State 07-09-2007 90113 009 ****50.00				
Principal Place of Business 29728 WATERBURY CIRCLE PERRYSBURG, OH 43551		Mailing Address 29728 WATERBURY CIRCLE PERRYSBURG, OH 43551		40123034					
2. Principal Place of Business - No P.O. Box #		3. Mailing Address 365 MacENEJ DR							
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			07042007	Chg-LLC	CR2E083	3 (12/06)	
City & State OSPREV, FL.		City & State			4. FEI Numb 54-207			_ 	oplied For ot Applicable
3422°	9 Country	Zip	Country		5. Certificate	of Status Desired		5.00 Add se Require	
	6. Name and Address of Current F	Registered Agent			7. Name and	Address of New R	egistered Ag	ent	
SMITH, MI	CHAEL A		Na	me					
8163 JOZE	EE CIRCLE D. FL 32836		Stre	eet Address (P.O. Box Numb	er is Not Acceptable	9)		
	.,,								
			City	у			FL	Zip Code	e
8. The above the obligati	named entity submits this statement for ions of registered agent.	the purpose of changing its re-	gistered offi	ice or register	ed agent, or bo	th, in the State of Flo	orida. I am far	niliar with,	and accept
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···	Signeture, typed or printed name of registered agent a	nd title if applicable. (NOTE: Ri	egistered Agent	signature required	when reinstating)		DATE		
	ing fee is \$50.00 by September 14, 2007	nd title if applicable. (NOTE: Ri	egistered Agent	signature required	when reinstating)		DATE e check pay n Departmen		•
	ing Fee is \$50.00		egistered Agent	signature required	when reinstating)		e check pay Departmen		•
9.	ing Fee is \$50.00 by September 14, 2007 MANAGING MEMBER MGRM		10.	MGR	<u> </u>	ADDITIONS	e check pay Departmen		Addition
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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 company of the receiver or pusted empowered to execute this report as required by Chapter 608, Florida Statutes.

POSERT & Sum SIGNATURE: SIGNATURE AND TYPED OR PRINTED HAME OF SIGNING MANAGING MEMBER, MANAGER OR AUTHORIZED REPRESENTATIVE 7.4.07 941.918 · 205