

2009 LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT

DOCUMENT# L02000026296

FILED
Feb 02, 2009
Secretary of State**Entity Name:** ROBERT AND NANCY SMITH FAMILY INVESTMENTS I, LLC**Current Principal Place of Business:**363 MACEWEN DR.
OSPREY, FL 34229**New Principal Place of Business:****Current Mailing Address:**363 MACEVIN DR
OSPREY, FL 34229**New Mailing Address:****FEI Number:** 54-2078019**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**SMITH, MICHAEL A
8163 JOZEE CIRCLE
ORLANDO, FL 32836 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, ROBERT A
Address: 363 MACEWEN DR.
City-St-Zip: OSPREY, FL 34229**Title:** MGRM () Delete
Name: SMITH, NANCY L
Address: 363 MACEWEN DR.
City-St-Zip: OSPREY, FL 34229**ADDITIONS/CHANGES:****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 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: ROBERT A. SMITH

MGR

02/02/2009

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