## 2008 LIMITED LIABILITY COMPANY **ANNUAL REPORT**

DOCUMENT # L02000029476 ....

1. Entity Name SUSAN C. SMITH RANCH LLC



**FILED** Apr 24, 2008 08:00 AN Secretary of State

Principal Place of Business

222 S. SIXTH AVENUE WAUCHULA, FL 33873 Mailing Address

P.O. BOX 995

WAUCHULA, FL 32873



03172008 No Chg-LLC

CR2E083 (12/07)

4. FEI Number			Applied For
NOT APPLICABLE			Not Applicable
5. Certificate of Status Desired	П	\$5.0	0 Additional

6. Name and Address of Current Registered Agent

SMITH, SUSAN C 222 S. SIXTH AVENUE WAUCHULA, FL 33873

	named entity submits this statement for the purpose of char tions of registered agent.	nging its registered office or registered agent, or both, in the St.	ate of Florida. I am familiar with, and accept
'	Signature, typed or printed name of registered agent and title if applicable	(NOTE: Registered Agent signalure required when reinstating)	DATE
	NOWIII FEE IS \$138.75 y 1, 2008 Fee will be \$538.75		
)	MANAGING MEMBERS/MANAGERS		等了。12.74年上海县第1.35年至17.00
ITLE	MGRM		
AME	SMITH, SUSAN C		
TREET ADDRESS	222 S SIXTH AVE		
SITY-ST-ZIP	WAUCHULA, FL 33873		

TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS

DO NOT WRITE IN THIS SPACE

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information 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 or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

CITY-ST-ZIP

Susan C. Snith

4-21-08

863-773-2151

Daytime Phone #