

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000050362

FILED  
Mar 04, 2007  
Secretary of State

Entity Name: SMITH INVESTMENTS, LLC

**Current Principal Place of Business:**

6817 SOUTHPOINT PARKWAY, SUITE 1302  
JACKSONVILLE, FL 32216

**New Principal Place of Business:**

**Current Mailing Address:**

6817 SOUTHPOINT PARKWAY, SUITE 1302  
JACKSONVILLE, FL 32216

**New Mailing Address:**

FEI Number: 02-0712846

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

WILCOX LAW FIRM  
6817 SOUTHPOINT PARKWAY, SUITE 1302  
JACKSONVILLE, FL 32216 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, JAMES C  
Address: 6817 SOUTHPOINT PARKWAY, SUITE 1302  
City-St-Zip: JACKSONVILLE, FL 32216

**ADDITIONS/CHANGES:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: JAMES C. SMITH

MEMB

03/04/2007

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