


**2007 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Apr 26, 2007 08:00 AM
Secretary of State

DOCUMENT # L03000055674 1. Entity Name SMART-GIBSON FAMILY ENTERPRISES, L.L.C.	
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Principal Place of Business 711 PARK LAKE CIRCLE ORLANDO, FL 32803	Mailing Address 711 PARK LAKE CIRCLE ORLANDO, FL 32803
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04232007No Chg-LLC CR2E083 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 20-0511337	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$5.00 Additional Fee Required	

6. Name and Address of Current Registered Agent EGAN, LINDA G 711 PARK LAKE CIRCLE ORLANDO, FL 32803
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**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.		
SIGNATURE <u>Linda G. Egan</u>	<u>Linda G. Egan</u>	<u>4-23-2007</u>
<small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when re-registering) DATE</small>		

**Filing Fee is \$50.00
Due by May 1, 2007**

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR GIBSON, W. C P.O. BOX 208 SAPPHIRE, NC 28774
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR EGAN, LINDA G 711 PARK LAKE CIRCLE ORLANDO, FL 32803
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR GIBSON, A. R PO BOX 5501 DESTIN, FL 32541
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR RISALVATO, THOMAS J 151 MARY ESTHER BLVD STE 301 MARY ESTHER, FL 32569
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

U000000734663
05/10/07-80002-022 50.00

**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: <u>Linda G. Egan</u>	<u>Linda G. Egan</u> <u>4/23/07</u> <u>407-898-1063</u>
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #</small>	