

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000038540

Entity Name: SMITH, THOMAS & HENDRIX LLC

FILED
Feb 17, 2005
Secretary of State

Current Principal Place of Business:

152 SE DEFENDER DRIVE
LAKE CITY, FL 32025

New Principal Place of Business:

Current Mailing Address:

152 SE DEFENDER DRIVE
LAKE CITY, FL 32025

New Mailing Address:

FEI Number:

FEI Number Applied For ()

FEI Number Not Applicable (X)

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HENDRIX, SABRINA K
436 SW BISHOP AVENUE
LAKE CITY, FL 32024 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/MEMBERS:

Title: MGRM () Delete
Name: HENDRIX, SABRINA K
Address: 436 SW BISHOP AVENUE
City-St-Zip: LAKE CITY, FL 32024

Title: MGRM () Delete
Name: THOMAS, DERRICK
Address: 206 SW CREST GLENN
City-St-Zip: LAKE CITY, FL 32024

Title: MGRM () Delete
Name: SMITH, JENNIFER J
Address: RT 27 BOX 2486
City-St-Zip: LAKE CITY, FL 32024

ADDITIONS/CHANGES:

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

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 for the exemption stated in Section 119.07(3)(i), 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: SABRINA K HENDRIX

MGRM

02/17/2005

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