

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000060310

FILED
Aug 20, 2009
Secretary of State

Entity Name: EF SMART LLC

Current Principal Place of Business:

4425 CROOKED MILE ROAD
MERRITT ISLAND, FL 32952

New Principal Place of Business:

Current Mailing Address:

4425 CROOKED MILE ROAD
MERRITT ISLAND, FL 32952

New Mailing Address:

FEI Number: 33-1108114 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

MCBRIDE, JOSEPH D JR.
4667 NORTH FRIDAY CIRCLE
COCOA, FL 32926 US

Name and Address of New Registered Agent:

MCBRIDE, JOSEPH D JR.
492 TINA PLACE
MERRITT ISLAND, FL 32952 US

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: JOSEPH D. MCBRIDE JR.

08/20/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: HALL, STEPHEN L
Address: 4425 CROOKED MILE ROAD
City-St-Zip: MERRITT ISLAND, FL 32952

Title: MGR () Delete
Name: MCBRIDE, JOSEPH D JR.
Address: 4667 NORTH FRIDAY CIRCLE
City-St-Zip: COCOA, FL 32926

ADDITIONS/CHANGES:

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

Title: MGR (X) Change () Addition
Name: MCBRIDE, JOSEPH D JR.
Address: 492 TINA PLACE
City-St-Zip: MERRITT ISLAND, FL 32952

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: JOSEPH D. MCBRIDE

MGR

08/20/2009

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