## 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L04000071744 SMBP, LLC

Principal Place of Business

28179 VANDERBILT DRIVE

SUITE #2

NAME STREET ADDRESS CITY - ST - 21P TITLE NAME

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

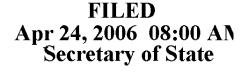
BONITA SPRINGS, FL 34134

Mailing Address

28179 VANDERBILT DRIVE

SUITE #2

BONITA SPRINGS, FL 34134





04202006 No Chg-LLC DO NOT WRITE IN THIS SPACE

CR2E083 (11/05)

4. FEI Number 63-0015320 Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

ROACH, PHILLIP A 28179 VANDERBILT DRIVE SUITE #2

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BONITA S	PRINGS, FL 34134	1111	IIIIO OFF	ACL .
	e named entity submits this statement for the purpose of cha- tions of registered agent.	nging its registered office or registered agent, or	both, in the State of Floric	la. I am familiar with, and accept
SIGNATURE.	Signature, typed or printed name of registered egent and title if applicable.	(NOTE Registered Agent signature required when reinstating)		DATE
	iling Fee is \$50.00 ue by May 1, 2006			garage and the second s
9.	MANAGING MEMBERS/MANAGERS			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR STOPPS, WILLIAM E 28179 VANDERBILT DR, STE 2 BONITA SPRINGS, FL 341347987		05/ <u>06</u> /06-1	30084-002 SU_QU

DO NOT WRITE

STREET ADDRESS CiTY-ST-ZiP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP

CITY-ST-ZIP 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: G MEMBER, OR AUTHORIZED REPRESENTATIVE

4/21/06

WILLIAM E.