2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000085593

Entity Name: SMITHERS LAND L.L.C.

FILED Feb 27, 2005 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

 2151 WELLS AVE.
 2151 WELLS AVE.

 SARASOTA, FL 34239
 SARASOTA, FL 34232

Current Mailing Address: New Mailing Address:

 2151 WELLS AVE.
 2151 WELLS AVE.

 SARASOTA, FL 34239
 SARASOTA, FL 34232

FEI Number: 20-1933030 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

SMITHERS, ROBERT
2151 WELLS AVE.
SARASOTA, FL 34239 US
SMITHERS, ROBERT
2151 WELLS AVE.
SARASOTA, FL 34232 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: 02/27/2005

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MEMBERS: ADDITIONS/CHANGES:

Title: MGRM () Delete Title: MGRM (X) Change () Addition Name: SMITHERS, ROBERT SMITHERS, ROBERT

 Address:
 2151 WELLS AVE.
 Address:
 2151 WELLS AVE.

 City-St-Zip:
 SARASOTA, FL 34239
 City-St-Zip:
 SARASOTA, FL 34232

Title: MGRM () Delete Title: () Change () Addition

 Name:
 SMITHERS, JASON
 Name:

 Address:
 7236 SHEPHERD STREET
 Address:

 City-St-Zip:
 SARASOTA, FL 34243
 City-St-Zip:

Title: MGRM () Delete Title: () Change () Addition

 Name:
 SMITHERS, JOSHUA
 Name:

 Address:
 4607 NOBLE PLACE
 Address:

 City-St-Zip:
 PARRISH, FL 34219
 City-St-Zip:

Title: MGRM () Delete Title: () Change () Addition

 Name:
 ROUNTREE, KRISTEN
 Name:

 Address:
 1666 BOCA CHICA AVE.
 Address:

 City-St-Zip:
 NORTH PORT, FL 34286
 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: ROBERT SMITHERS MGRM 02/27/2005