

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000064384

FILED  
Apr 13, 2009  
Secretary of State

**Entity Name:** SMARTER REALTY OF HIGHLANDS COUNTY LLC

**Current Principal Place of Business:**

218 E. PINE STREET  
LAKELAND, FL 33801

**New Principal Place of Business:**

2359 US 27 S  
SEBRING, FL 33870

**Current Mailing Address:**

218 E. PINE STREET  
LAKELAND, FL 33801

**New Mailing Address:**

2359 US 27 S  
SEBRING, FL 33870

**FEI Number:** 84-1684849

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

MCLAUGHLIN, T. CHRISTOPHER ESQ.  
218 E. PINE STREET  
LAKELAND, FL 33801 US

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

MIKULECKY, GARY  
2359 US 27 S  
SEBRING, FL 33870 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: GARY MIKULECKY

04/13/2009

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR ( ) Delete  
Name: MCLAUGHLIN, T. CHRISTOPHER JR.  
Address: 218 E. PINE STREET  
City-St-Zip: LAKELAND, FL 33801

Title: RA ( ) Delete  
Name: MIKULECKY, GARY A  
Address: 2359 US 27 SOUTH  
City-St-Zip: SEBRING, FL 33870

Title: MGR ( ) Delete  
Name: MIKULECKY, GARY A  
Address: 2359 US 27 SOUTH  
City-St-Zip: SEBRING, FL 33870

**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 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: GARY MIKULECKY

MGR

04/13/2009

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