

**2008 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Mar 17, 2008 08:00 A
Secretary of State

DOCUMENT # L05000067076 1. Entity Name SMALLEY & COMPANY PAYROLL, LLC	
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Principal Place of Business 1519 E HILLCREST STREET ORLANDO, FL 32803 US	Mailing Address 1517 E HILLCREST STREET ORLANDO, FL 32803 US
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DO NOT WRITE IN THIS SPACE



03142008 No Chg-LLC

CR2E083 (12/07)

4. FEI Number 20-3127703	Applied For Not Applicable
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5. Certificate of Status Desired ☐	\$5.00 Additional Fee Required
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6. Name and Address of Current Registered Agent CARROLL, LISA M 1517 E HILLCREST STREET ORLANDO, FL 32803
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DO NOT WRITE IN THIS SPACE

8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE _____ Signature, typed or printed name of registered agent and title if applicable (NOTE Registered Agent signature required when reinstating) DATE
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FILE NOW!!! FEE IS \$138.75 After May 1, 2008 Fee will be \$538.75

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM CARROLL, LISA M 1517 E HILLCREST STREET ORLANDO, FL 32803
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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: <u>Lisa M Carroll</u> MANAGING MEMBER <u>3/14/08</u> <u>407-897-2277</u> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #
