

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

**FILED
Jan 04, 2006
Secretary of State**

DOCUMENT# L05000083792

Entity Name: 2144 SMOAKS STREET, LLC

Current Principal Place of Business:

15 NATURE VIEW DRIVE
UXBRIDGE, MA 01569

New Principal Place of Business:

Current Mailing Address:

15 NATURE VIEW DRIVE
UXBRIDGE, MA 01569

New Mailing Address:

FEI Number: 20-3355169 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LEVINE, LAWRENCE A P.A.
790 EAST BROWARD BLVD.
SUITE 302
FORT LAUDERDALE, FL 33301 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: BORDONI, KATHLEEN J
Address: 15 NATURE VIEW DRIVE
City-St-Zip: UXBRIDGE, MA 01569 US

ADDITIONS/CHANGES:

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

I hereby certify that the information supplied with this filing does not qualify for the 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: KATHLEEN J. BORDONI

MGRM

01/04/2006

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