## 2007 LIMITED LIABILITY COMPANY

## **FILED ANNUAL REPORT** Apr 23, 2007 08:00 A Secretary of State DOCUMENT #L05000105766 1. Entity Name DARRELL M. SMITH "LLC" Principal Place of Business Mailing Address 43215 W. THIRD STREET 43215 W. THIRD STREET PAISLEY, FL 32767 PAISLEY, FL 32767 02272007 No Chg-LLC CR2E083 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 76-0804464 Not Applicable \$5.00 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent SMITH, DARRELL, M DO NOT WRITE 43215 W. THIRD STREET PAISLEY, FL 32767 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 against and title if applicable, (NOTE: Registered Agent signature required when reinstating) DATE <del>1000000724421</del> Filing Fee is \$50.00 05/02/07~80110-020 50.00 Due by May 1, 2007 9. MANAGING MEMBERS/MANAGERS MGRM TITLE SMITH, DARRELL M NAME STREET ADDRESS 43215 W. THIRD STREET CATY-ST-ZIP PAISLEY, FL 32767 TITLE MAKE STREET ADDRESS CITY-ST-71P TIRE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP MUE IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP MLE NAME STREET ADDRESS CITY-ST-7P MNF NAME STREET ADDRESS 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 preceiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

CING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE