## 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

## DOCUMENT# L05000119556

Entity Name: THE SM2 LLC

FILED Aug 20, 2007 Secretary of State

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

1649 SWAN TERRACE 1649 SWAN TERRACE

NORTH FT. MYERS, FL 33913 NORTH FT. MYERS, FL 33903

Current Mailing Address: New Mailing Address:

1649 SWAN TERRACE 1649 SWAN TERRACE

NORTH FT. MYERS, FL 33913 NORTH FT. MYERS, FL 33903

FEI Number: FEI Number Applied For ( ) FEI Number Not Applicable (X) Certificate of Status Desired ( )

In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

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

EVANS, WILLIAM H EVANS, EVELYN A 1649 SWAN TER 1649 SWAN TER

NORTH FORT MYERS, FL 33903 US NORTH FORT MYERS, FL 33903 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: EVELYN A. EVANS 08/20/2007

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

Title: P ( ) Delete Title: P (X) Change ( ) Addition

Name: EVANS, WILLIAM H
Address: 1649 SWAN TER

Name: EVANS, EVEL A
Address: 1649 SWAN TER

City-St-Zip: NORTH FORT MYERS, FL 33903 City-St-Zip: NORTH FORT MYERS, FL 33903

Title: ST () Delete Title: ST (X) Change () Addition

Name: EVANS, EVELYN A Name: AALDERINK, JUDITH J Address: 1649 SWAN TERR Address: 918 NE 18 TER

Address. 1049 Syvan Ferr Address. 910 NE 10 FER

City-St-Zip: NORTH FORT MYERS, FL 33903 City-St-Zip: CAPE CORAL, FL 33909

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: EVELYN A. EVANS P 08/20/2007