2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 30, 2009
Secretary of State

DOCUMENT# L06000070311

Entity Name: S & M HOSPITALITY, LLC

Current Principal Place of Business:

3520 HIGHWAY 98 NORTH
LAKELAND, FL 33809

New Principal Place of Business:

Current Mailing Address:

3520 HIGHWAY 98 NORTH
LAKELAND, FL 33809

New Mailing Address:

FEI Number: 20-5356079 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

PATEL, MAHESH D
4420 N. SOCRUM LOOP RD.
LAKELAND, FL 33809 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:	PATEL, SONMUCHLAL L	
Address:	7573 FAIRLINK COURT E.	
City-St-Zip:	SARASOTA, FL 34243	
Title:	MGRM	( ) Delete
Name:	PATEL, RAMILA S	
Address:	7573 FAIRLINK COURT E.	
City-St-Zip:	SARASOTA, FL 34243	
Title:	MGRM	( ) Delete
Name:	PATEL, MAHENDRA A	
Address:	20 RIO VISTA RD.	
City-St-Zip:	ARCADIA, FL 34266	
Title:	MGRM	( ) Delete
Name:	PATEL, RITA M	
Address:	20 RIO VISTA RD.	
City-St-Zip:	ARCADIA, FL 34266	
Title:	MGRM	( ) Delete
Name:	NAGAR, MANU	
Address:	3783 ROLLINGSFORD CIRCLE	
City-St-Zip:	LAKELAND, FL 33810	
Title:	MGRM	( ) Delete
Name:	PATEL, MAHESH D	
Address:	4009 STAFFORDSHIRE DR.	
City-St-Zip:	LAKELAND, FL 33809	

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:	
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: MANU NAGAR MGRM 04/30/2009

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