

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000078759

FILED
Jul 03, 2007
Secretary of State

Entity Name: SMITHA & GRIFFITH SOUTH, LLC

Current Principal Place of Business:

5345 N. US HWY. 441
OCALA, FL 34475 US

New Principal Place of Business:

Current Mailing Address:

5345 N. US HWY. 441
OCALA, FL 34475 US

New Mailing Address:

FEI Number: 20-5353627 FEI Number Applied For () FEI Number Not Applicable () 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:

SMITHA, SHERMAN
5345 N. US HWY. 441
OCALA, FL 34475 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:

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: SMITHA, SHERMAN
Address: 5345 N. US HWY. 441
City-St-Zip: OCALA, FL 34475 US

Title: MGRM () Delete
Name: GRIFFITH, GREG
Address: 5345 N. US HWY. 441
City-St-Zip: OCALA, FL 34475 US

ADDITIONS/CHANGES:

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: SHERMAN SMITHA

MR

07/03/2007

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