2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
May 01, 2009
Secretary of State

DOCUMENT# L06000120438

Entity Name: MCCLAIN, SMOAK & CHISTOLINI, LLC

Current Principal Place of Business:

1000 N. ASHLEY DRIVE
SUITE 500
TAMPA, FL 33602

New Principal Place of Business:

Current Mailing Address:

1000 N. ASHLEY DRIVE
SUITE 500
TAMPA, FL 33602

New Mailing Address:

FEI Number: 20-8153210 **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:

SMOAK, WILLIAM G
1000 N. ASHLEY DRIVE
SUITE 500
TAMPA, FL 33602 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:	MCCLAIN, DAVID H	
Address:	1000 N. ASHLEY DRIVE, SUITE 500	
City-St-Zip:	TAMPA, FL 33602	
Title:	MGRM	( ) Delete
Name:	SMOAK, WILLIAM G	
Address:	1000 N. ASHLEY DRIVE, SUITE 500	
City-St-Zip:	TAMPA, FL 33602	
Title:	MGRM	( ) Delete
Name:	CHISTOLINI, PAUL U	
Address:	1000 N. ASHLEY DRIVE, SUITE 500	
City-St-Zip:	TAMPA, FL 33602	

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:	

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: WILLIAM G K SMOAK MGRM 05/01/2009

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