2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Feb 23, 2009
Secretary of State

DOCUMENT# L07000045050

Entity Name: SMMFMLY, LLC

Current Principal Place of Business:

5804 CRUISER WAY
TAMPA, FL 33615

New Principal Place of Business:

450 KNIGHTS RUN AVE
1704
TAMPA, FL 33602

Current Mailing Address:

C/O SHARON MARINO
450 KNIGHTS RUN AVE, 1704
TAMPA, FL 33602 US

New Mailing Address:

450 KNIGHTS RUN AVE
1704
TAMPA, FL 33602

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

Name and Address of Current Registered Agent:

COSTELLO, TRUMAN J
12670 NEW BRITTANY BLVD #101
FORT MYERS, FL 33907 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: MGR ( ) Delete
Name: MARINO, SHARON M
Address: 9502 HARPENDER WAY
City-St-Zip: TAMPA, FL 33626

ADDITIONS/CHANGES:

Title: MGR (X) Change ( ) Addition
Name: MARINO, SHARON M
Address: 450 KNIGHTS RUN AVE #1704
City-St-Zip: TAMPA, FL 33602

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: SHARON M. MARINO MGR 02/23/2009

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