

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L07000050164

**FILED**  
**Feb 23, 2010**  
**Secretary of State**

**Entity Name:** CODE SMITH PROPERTIES I, LLC

**Current Principal Place of Business:**

433 2ND STREET SOUTH  
SUITE B  
SAFETY HARBOR, FL 34695 US

**New Principal Place of Business:**

**Current Mailing Address:**

433 2ND STREET SOUTH  
SUITE B  
SAFETY HARBOR, FL 34695 US

**New Mailing Address:**

**FEI Number:** 26-0151405      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

SMITH, ROBERT L  
2053 BROOKSIDE DRIVE  
SAFETY HARBOR, FL 34695 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  
Name: SMITH, ROBERT L  
Address: 2053 BROOKSIDE DRIVE  
City-St-Zip: SAFETY HARBOR, FL 34695 US

Title: MGRM  
Name: CODE, BRIAN E  
Address: 10029 ORANGE GROVE DRIVE  
City-St-Zip: TAMPA, FL 33618 US

Title: MGRM  
Name: CODE, JORDAN P  
Address: 4413 W FLA ST  
City-St-Zip: TAMPA, FL 33609

I hereby 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: ROBERT L SMITH

MGRM

02/23/2010

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