2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000084865

Current Principal Place of Business:

Entity Name: SMITH-KELLY, LLC

FILED Jan 03, 2008 Secretary of State

400 TEXAS STREET, STE 927 SHREVEPORT, LA 71101 **Current Mailing Address: New Mailing Address:** PO BOX 65 SHREVEPORT, LA 711650065 FEI Number: 26-0788450 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: AVANT, HARRY L 1128 DORMIE DRIVE NAPLES, FL 34108 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.

New Principal Place of Business:

SIGNATURE:

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

Title: MGR () Delete Title: () Change () Addition Name: AVANT, HARRY L Name:

 Address:
 PO BOX 65
 Address:

 City-St-Zip:
 SHREVEPORT, LA 711610065
 City-St-Zip:

Title: MGRM () Delete Title: MGRM (X) Change () Addition

 Name:
 KELLY, NINA M
 Name:
 AVANT, NINA M

 Address:
 1128 DORMIE DRIVE
 Address:
 1128 DORMIE DRIVE

 City-St-Zip:
 NAPLES, FL 34108
 City-St-Zip:
 NAPLES, FL 34108

Title: MGRM () Delete Title: () Change () Addition

 Name:
 SMITH ORPERATING AND, MANAGEMENT CO .
 Name:

 Address:
 PO BOX 52
 Address:

 City-St-Zip:
 SHREVEPORT, LA 711610052
 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: HARRY AVANT MGR 01/03/2008