

# 2009 LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT

DOCUMENT# L07000085976

FILED  
Apr 30, 2009  
Secretary of State

Entity Name: P.A. SMITH INVESTMENT MANAGEMENT, LLC

**Current Principal Place of Business:**

26740 ROBERTS RANCH ROAD  
IMMOKALEE, FL 34143

**New Principal Place of Business:**

26740 ROBERTS RANCH ROAD  
IMMOKALEE, FL 34142

**Current Mailing Address:**

P.O. BOX 1050  
IMMOKALEE, FL 34143

**New Mailing Address:**

FEI Number: 26-0792498

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

HASNER, MARK M ESW  
THERREL BAISDEN P.A.  
ONE S.E. 3RD AVE. SUITE 2950  
MIAMI, FL 33131 US

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

SMITH, CALVIN P  
26740 ROBERTS RANCH ROAD  
IMMOKALEE, FL 34142 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: CALVIN PERRY SMITH

04/30/2009

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR ( ) Delete  
Name: SMITH, CALVIN P  
Address: 26740 ROBERTS RANCH ROAD  
City-St-Zip: IMMOKALEE, FL 34143

Title: MGR ( ) Delete  
Name: SMITH, ADELE E  
Address: 26740 ROBERTS RANCH ROAD  
City-St-Zip: IMMOKALEE, FL 34143

**ADDITIONS/CHANGES:**

Title: MGR (X) Change ( ) Addition  
Name: SMITH, CALVIN P  
Address: 26740 ROBERTS RANCH ROAD  
City-St-Zip: IMMOKALEE, FL 34142

Title: MGR (X) Change ( ) Addition  
Name: SMITH, ADELE E  
Address: 18140 RIVERCHASE CT  
City-St-Zip: ALVA, FL 33920

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: CALVIN PERRY SMITH

MGRM

04/30/2009

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