

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000095734

Entity Name: STANKUNAS SMITH LLC

FILED
Feb 18, 2009
Secretary of State

Current Principal Place of Business:

14417 NW 152 LANE
SUITE 210
ALACHUA, FL 32615 US

New Principal Place of Business:

Current Mailing Address:

14417 NW 152 LANE
SUITE 210
ALACHUA, FL 32615 US

New Mailing Address:

FEI Number: 26-1091851

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

STANKUNAS, FRANK L
14417 NW 152 LANE
SUITE 210
ALACHUA, FL 32615 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: STANKUNAS, FRANK
Address: 14417 NW 152 LANE, SUITE 210
City-St-Zip: ALACHUA, FL 32615 US

Title: MGRM () Delete
Name: STANKUNAS, SHARON
Address: 14417 NW 152 LANE, SUITE 210
City-St-Zip: ALACHUA, FL 32615 US

Title: MGRM () Delete
Name: JACK M. SMITH REVOCA, BLE TRUST
Address: 235 MAISON COURT
City-St-Zip: ALTAMONTE SPRINGS, FL 32714 US

Title: MGRM () Delete
Name: BARBARA L. SMITH RE, VOCABLE TRUST
Address: 235 MAISON COURT
City-St-Zip: ALTAMONTE SPRINGS, FL 32714 US

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:

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: FRANK L STANKUNAS

MGRM

02/18/2009

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