

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L08000023690

**FILED**  
**Apr 29, 2010**  
**Secretary of State**

**Entity Name:** S & M MANN INVESTMENTS, L.L.C.

**Current Principal Place of Business:**

2223 COUNTY ROAD 543  
SUMTERVILLE, FL 33585

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 136  
SUMTERVILLE, FL 335850136

**New Mailing Address:**

**FEI Number:** 20-2424872

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

MANN, BARRY S  
2223 COUNTY ROAD 543  
SUMTERVILLE, FL 33585 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:** MANN, BARRY S  
**Address:** 2223 COUNTY ROAD 543  
**City-St-Zip:** SUMTERVILLE, FL 33585

**Title:** MGRM  
**Name:** MANN, MELISSA  
**Address:** 2223 COUNTY ROAD 543  
**City-St-Zip:** SUMTERVILLE, FL 33585

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:** MELISSA MANN

MGRM

04/29/2010

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