2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000074704

Entity Name: MIKE SMITH'S AG SERVICE, LLC

FILED Apr 02, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

1106-A 10TH STREET 4103 NEPTUNE ROAD SAINT CLOUD, FL 34769 SAINT CLOUD, FL 34769

Current Mailing Address: New Mailing Address:

4103 NEPTUNE ROAD 1106-A 10TH STREET SAINT CLOUD, FL 34769 SAINT CLOUD, FL 34769

FEI Number: 26-3145117 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

SMITH, MICHAEL H SMITH, MICHAEL H 4103 NEPTUNE ROAD 1106-A 10TH STREET SAINT CLOUD, FL 34769 SAINT CLOUD, FL 34769 US 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: 04/02/2009

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

ADDITIONS/CHANGES:

MGR Title: () Delete (X) Change () Addition SMITH, MICHAEL H SMITH, MICHAEL H Name: Name: 1106-A 10TH STREET Address: 4103 NEPTUEN ROAD Address:

City-St-Zip: SAINT CLOUD, FL 34769 City-St-Zip: SAINT CLOUD, FL 34769

Title: MGRM Title: MGRM (X) Change () Addition () Delete SMITH, SONYA Name: SMITH, SONYA Name:

Address: 1106-A 10TH STREET Address: 4103 NEPTUNE ROAD City-St-Zip: SAINT CLOUD, FL 34769 City-St-Zip: SAINT CLOUD, FL 34769

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

EDGEMON, JUDY T EDGEMON, JUDY T Name: Name: 4103 NEPTUNE ROAD Address: 1106-A 10TH STREET Address: City-St-Zip: SAINT CLOUD, FL 34769 City-St-Zip: SAINT CLOUD, FL 34769

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

Name: OLIVER, GEORGE W Name: OLIVER, GEORGE W Address: 1106-A 10TH STREET Address: 4103 NEPTUNE ROAD City-St-Zip: SAINT CLOUD, FL 34769 City-St-Zip: SAINT CLOUD, FL 34769

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: MICHAEL SMITH 04/02/2009