


**2008 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Feb 29, 2008 08:00 AM
Secretary of State

DOCUMENT # L98000002653 1. Entity Name WELLINGTON-SMITH, L.C.	
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Principal Place of Business 14255 US HWY ONE SUITE 2175 JUNO BEACH, FL 33408	Mailing Address 14255 US HWY ONE SUITE 2175 JUNO BEACH, FL 33408
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02222008No Chg-LLC

CR2E083 (12/07)

DO NOT WRITE IN THIS SPACE

4. FEI Number 65-0872270	Applied For Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required
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6. Name and Address of Current Registered Agent SMITH, BARBARA B 188 SPYGLASS COURT JUPITER, FL 33477

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

**FILE NOW!!! FEE IS \$138.75
After May 1, 2008 Fee will be \$538.75**

000000843854
03/12/08-80012-007 138.75

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR SMITH, DENIS C 188 SPYGLASS LN JUPITER, FL 33477
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR SMITH, BARBARA 188 SPYGLASS LANE JUPITER, FL 33477
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IN THIS SPACE**

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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: 
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

2/25/08 **561-630-0257**
Date Daytime Phone #