## 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

## DOCUMENT# M0400000035

60 COSMA ROAD

City-St-Zip: NORTH EASTON, MA 02356

Address:

Entity Name: SMA & PLB REALTY ASSOCIATES, LLC

FILED Jan 06, 2007 Secretary of State

| Current Principal Place of Business:          |   |  | New Principal Place of Business:            |                                       |
|---|---|--|---|---------------------------------------|
|   | SERVICE AV<br>ROVIDENCE,                            |  |   |                                       |
| Current N                                     | lailing Addre                                       | ss:  | New Mailing Addres                          | s:                                    |
| 60 COSM/<br>NORTH E                           | A ROAD<br>ASTON, MA                                 | 02356  |   |                                       |
| FEI Number                                    | : 20-0399375  | FEI Number Applied For()                                 | FEI Number Not Applicable ( )               | Certificate of Status Desired ( )     |
| Name and Address of Current Registered Agent: |   |  | Name and Address of New Registered Agent:   |                                       |
| C/O COKE<br>1404 S. Al                        | ROD ESQ.<br>ER & FEINER<br>NDREWS AVI<br>ERDALE, FL | ENUE<br>333161840 US                                     |   |                                       |
|   | e named entity<br>e of Florida.                     | submits this statement for the p                         | ourpose of changing its registere           | d office or registered agent, or both |
| SIGNATUI                                      | RE:   |  |   |                                       |
|   | Electro   | nic Signature of Registered Ag                           | ent   | Date                                  |
| MANAGING MEMBERS/MANAGERS:                    |   |  | ADDITIONS/CHANGES:                          |                                       |
| Title:<br>Name:<br>Address:<br>City-St-Zip:   | ANJOORIAN, S<br>177 HIGH SEF                        | ) Delete<br>SYLVIA M<br>RVICE AVENUE<br>IDENCE, RI 02904 | Title:<br>Name:<br>Address:<br>City-St-Zip: | ( ) Change ( ) Addition               |
| Title:<br>Name:                               | MGR (<br>BARTLETT, PA                               | ) Delete<br>ATRICIA L                                    | Title:<br>Name:                             | ( ) Change ( ) Addition               |

Address:

City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: PATRICIA L. BARTLETT MGR 01/06/2007