2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 17, 2009
Secretary of State

DOCUMENT# M06000001715

Entity Name: SMG FOOD AND BEVERAGE, LLC

Current Principal Place of Business:

400 FIRST STREET SOUTH
ST. PETERSBURG, FL 33701

New Principal Place of Business:

300 CONSHOHOCKEN STATE ROAD
SUITE 450
W. CONSHOHOCKEN, PA 19428

Current Mailing Address:

701 MARKET ST
4TH FL
PHILADELPHIA, PA 19106

New Mailing Address:

300 CONSHOHOCKEN STATE ROAD
SUITE 450
W. CONSHOHOCKEN, PA 19428

FEI Number: 26-2917302 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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:	THORSON, MARTIN	
Address:	701 MARKET STREET	
City-St-Zip:	PHILADELPHIA, PA 19106	
Title:	MGRM	( ) Delete
Name:	WESTLEY, HAROLD LESTER	
Address:	701 MARKET STREET	
City-St-Zip:	PHILADELPHIA, PA 19106	
Title:	MGRM	(X) Delete
Name:	GINTY, MAUREEN	
Address:	701 MARKET STREET	
City-St-Zip:	PHILADELPHIA, PA 19106	
Title:	MGRM	(X) Delete
Name:	BURNS, JOHN FRANCES	
Address:	701 MARKET STREET	
City-St-Zip:	PHILADELPHIA, PA 19106	

ADDITIONS/CHANGES:

Title:	MGR	(X) Change ( ) Addition
Name:	WESTLEY, HAROLD	
Address:	300 CONSHOHOCKEN STATE ROAD, SUITE 450	
City-St-Zip:	W. CONSHOHOCKEN, PA 19428	
Title:	MGR	(X) Change ( ) Addition
Name:	BURNS, JOHN F	
Address:	300 CONSHOHOCKEN STATE ROAD, SUITE 450	
City-St-Zip:	W. CONSHOHOCKEN, PA 19428	
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: JOHN F BURNS MGR 04/17/2009

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