

**2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L16000092219

**Entity Name:** SMITH'S HUNTING SUPPLY & ACCESSORIES LLC

**Current Principal Place of Business:**

1487 MASTERS DR, #3  
ST AUGUSTINE, FL 32084

**Current Mailing Address:**

PO BOX 9023  
ST AUGUSTINE, FL 32085 US

**FEI Number:** 81-2589199

**Certificate of Status Desired:** Yes

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

SMITH, WILLIAM W  
5071 AVENUE B  
ST AUGUSTINE, FL 32095 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:**

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title MGR  
Name SMITH, WILLIAM W  
Address 5071 AVENUE B  
City-State-Zip: ST AUGUSTINE FL 32095

Title AR  
Name GREEN, ANGELA N  
Address 2055 SARA LYNN DR  
City-State-Zip: ST AUGUSTINE FL 32084

*I hereby certify that the information indicated on this report or supplemental 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 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** WILLIAM W SMITH

MGR

01/10/2017

Electronic Signature of Signing Authorized Person(s) Detail

Date