

**2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# G91571

**Entity Name:** TSL DEVELOPMENT OF FLORIDA, INC.

**Current Principal Place of Business:**

5516 RIVER ROAD  
NEW PORT RICHEY, FL 34652-3743

**Current Mailing Address:**

5516 RIVER ROAD  
NEW PORT RICHEY, FL 34652-3743 US

**FEI Number:** 59-2408590

**Certificate of Status Desired:** No

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

SLIVE, MALCOLM H.  
5516 RIVER ROAD  
NEW PORT RICHEY, FL 34652 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

**Officer/Director Detail :**

Title	PSD	Title	VTD
Name	LAWN, MICHAEL	Name	SLIVE, MALCOLM
Address	5516 RIVER RD	Address	5516 RIVER RD
City-State-Zip:	NEW POERT RICHEY FL	City-State-Zip:	NEW PORT RICHEY FL

*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 an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** MALCOLMSLIVE

VP

02/02/2015

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date