

**2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L05000045077

**Entity Name:** SILVER SPOON LLC

**Current Principal Place of Business:**

119 9TH AVE N  
ST. PETERSBURG, FL 33701

**Current Mailing Address:**

PO BOX 649  
ST. PETERSBURG, FL 33731 US

**FEI Number:** 20-2809718

**Certificate of Status Desired:** No

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

IRWIN, INNES H  
119 9TH AV N  
ST. PETERSBURG, FL 33701 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 MR  
Name IRWIN, INNES H  
Address PO BOX 649  
City-State-Zip: ST. PETERSBURG FL 33731

Title MR  
Name VARNEY, RUSSELL  
Address PO BOX 291370  
City-State-Zip: TAMPA FL 33687-1370

*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:** INNES H IRWIN

**MANAGER**

**04/29/2014**

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date