## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT# 639276** 

FILED Apr 17, 2009 Secretary of State

Entity Name: SLP INVESTMENTS, INC.					
Current Principal Place of Business:			New Principal Place o	New Principal Place of Business:	
4005 20TH VERO BEA	ST. CH, FL 32960	US			
Current Mailing Address:			New Mailing Address	New Mailing Address:	
4005 20TH VERO BEA	ST. CH, FL 32960	US			
FEI Number:	59-2470049	FEI Number Applied For ( )	FEI Number Not Applicable ( )	Certificate of Status Desired ( )	
Name and	Address of Cu	ırrent Registered Agent:	Name and Address of	Name and Address of New Registered Agent:	
PERKINS, LOUIS E 3717 10TH COURT VERO BEACH, FL 32960 US			PERKINS, LOUIS E E 3717 10TH COURT VERO BEACH, FL 329		
The above in the State		ubmits this statement for the pu	rpose of changing its registered	office or registered agent, or both,	
SIGNATUR	E: LOUIS E P	ERKINS		04/17/2009	
	Electronic	Signature of Registered Agen	t	Date	
Election Cam	paign Financing	Trust Fund Contribution ( ).			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	PD () [ PERKINS, LOUIS 3717 10TH COUI VERO BEACH, F	RT	Title: Name: Address: City-St-Zip:	()Change ()Addition	
Title: Name: Address: City-St-Zip:	STD () [ PERKINS, SHEL 3717 10TH COUI VERO BEACH, F	RT	Title: Name: Address: City-St-Zip:	()Change ()Addition	
Title: Name: Address: City-St-Zip:	V () [ PERKINS, EDWI 4015 20TH STRE VERO BEACH, F	EET	Title: Name: Address: City-St-Zip:	()Change ()Addition	
Title:	VP ()	Delete	Title:	( ) Change ( ) Addition	

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 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 an address, with all other like empowered.

Name:

Address:

City-St-Zip:

SIGNATURE: LOUIS E PERKINS P 04/17/2009

DECRESCENZO, MARY P

VERO BEACH, FL 32960 US

3727 10TH COURT

Name:

Address:

City-St-Zip: