

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# H27247

Entity Name: SSSL&T, INC.

FILED  
Jan 04, 2011  
Secretary of State

**Current Principal Place of Business:**

3966 OLD COTTONDALE RD  
MARIANNA, FL 32448

**New Principal Place of Business:**

**Current Mailing Address:**

P.O.BOX 5838  
MARIANNA, FL 32447

**New Mailing Address:**

FEI Number: 59-2466717

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

SPENCE, JR., WALTER W  
2774 INDIAN SPRINGS RD.  
MARIANNA, FL 32446 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

**OFFICERS AND DIRECTORS:**

Title: DP  
Name: SPENCE, JR., WALTER W DP  
Address: 2774 INDIAN SPRINGS RD.  
City-St-Zip: MARIANNA, FL 32446

Title: D  
Name: STEVENS, WILLIAM L D  
Address: 2525 SPRING CREEK RD  
City-St-Zip: MARIANNA, FL 32448

Title: D  
Name: STEVENS, RONALD L D  
Address: 2513 SPRING CREEK RD  
City-St-Zip: MARIANNA, FL 32448

Title: DS  
Name: LASH, JAMES W DS  
Address: 2816 BAKER STREET  
City-St-Zip: MARIANNA, FL 32448

Title: DT  
Name: TATUM, AUSTIN E DT  
Address: 1316 WOODGATE WAY  
City-St-Zip: TALLAHASSEE, FL 32308

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: WALTER W. SPENCE, JR.

DP

01/04/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date