

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L01000016325

**FILED**  
**Mar 06, 2012**  
**Secretary of State**

**Entity Name:** OLD TOWN SLINGSHOT, LLC

**Current Principal Place of Business:**

5770 WEST IRLO BRONSON  
STE 222  
KISSIMMEE, FL 34746

**New Principal Place of Business:**

**Current Mailing Address:**

5770 WEST IRLO BRONSON  
STE 222  
KISSIMMEE, FL 34746

**New Mailing Address:**

**FEI Number:** 59-3748913

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

MIRFIN, BRIAN  
5770 WEST IRLO BRONSON STE 222  
KISSIMMEE, FL 34746 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

**MANAGING MEMBERS/MANAGERS:**

**Title:** MGR  
**Name:** MIRFIN, BRIAN  
**Address:** 5770 W IRLO BRONSON, STE 222  
**City-St-Zip:** KISSIMMEE, FL 34746

**Title:** MGR  
**Name:** RYAN, JODIE  
**Address:** 7001 INTERNATIONAL DR  
**City-St-Zip:** ORLANDO, FL 32819

I hereby certify that the information indicated on this 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 608, Florida Statutes.

**SIGNATURE:** JODIE RYAN

MGR

03/06/2012

\_\_\_\_\_  
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date