

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L01000020721

Entity Name: S & L, LLC

FILED
Jan 07, 2008
Secretary of State

Current Principal Place of Business:

3890 TURTLE CREEK DR., STE. A
PORT ORANGE, FL 32127

New Principal Place of Business:

Current Mailing Address:

3890 TURTLE CREEK DR., STE. A
PORT ORANGE, FL 32127

New Mailing Address:

FEI Number: 59-3759452

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HOOD, CHARLES D JR.
444 SEABREEZE BLVD., STE. 900
DAYTONA BEACH, FL 32118 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 () Delete
Name: LECOMPTE, E. JOSEPH
Address: 3890 TURTLE CREEK DR., STE. A
City-St-Zip: PORT ORANGE, FL 32127

Title: MGR () Delete
Name: STAUDT, EDWARD
Address: 944 BRIDGEWATER DRIVE B2
City-St-Zip: PORT ORANGE, FL 32129

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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 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: E JOSEPH LECOMPTE

MGR

01/07/2008

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