

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L03000048548

**FILED**  
**Apr 01, 2012**  
**Secretary of State**

**Entity Name:** SLEEPY HOLLOW CAPITAL, LLC

**Current Principal Place of Business:**

401 NE 19TH AVE. SUITE 62  
SUITE 222B  
DEERFIELD BEACH, FL 33441

**New Principal Place of Business:**

401 NE 19TH AVE.  
SUITE 62  
DEERFIELD BEACH, FL 33441

**Current Mailing Address:**

401 NE 19TH AVE. SUITE 62  
SUITE 222B  
DEERFIELD BEACH, FL 33441

**New Mailing Address:**

401 NE 19TH AVE.  
SUITE 62  
DEERFIELD BEACH, FL 33441

**FEI Number:** 65-1085145

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

JEFFERS, GREG T  
401 NE 19TH AVE. SUITE 62  
DEERFIELD BEACH, FL 33441 US

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

JEFFERS, GREG T  
401 NE 19TH AVE.  
SUITE 62  
DEERFIELD BEACH, FL 33441 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: GREG JEFFERS

04/01/2012

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: JEFFERS, GREG T  
Address: 401 SE 19TH AVE. SUITE 62  
City-St-Zip: DEERFIELD BEACH, FL 33441

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: GREG JEFFERS

MM

04/01/2012

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