

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000048275

Entity Name: SLIPAR B, LLC

FILED
Apr 29, 2006
Secretary of State

Current Principal Place of Business:

12415 BERKELY SQUARE DRIVE
TAMPA, FL 33626

New Principal Place of Business:

6977 DOLCE WAY
ORLANDO, FL 32819

Current Mailing Address:

12415 BERKELY SQUARE DRIVE
TAMPA, FL 33626

New Mailing Address:

6977 DOLCE WAY
ORLANDO, FL 32819

FEI Number: 20-2701057

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LEVINE, BRIAN
12415 BERKELY SQUARE DRIVE
TAMPA, FL 33626 US

Name and Address of New Registered Agent:

LEVINE, BRIAN
6977 DOLCE WAY
ORLANDO, FL 32819 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: BRIAN LEVINE

04/29/2006

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: LEVINE, BRIAN
Address: 12415 BERKELY SQUARE DRIVE
City-St-Zip: TAMPA, FL 33626

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: LEVINE, BRIAN
Address: 6977 DOLCE WAY
City-St-Zip: ORLANDO, FL 32819

I hereby certify that the information supplied with this filing does not qualify for the 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: BRIAN LEVINE

MGR

04/29/2006

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