

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000092549

FILED
Apr 16, 2006
Secretary of State

Entity Name: SLF INVESTORS, LLC

Current Principal Place of Business:

800 E. HALLANDALE BEACH
SUITE 26
HALLANDALE BEACH, FL 33009

New Principal Place of Business:

Current Mailing Address:

800 E. HALLANDALE BEACH BLVD.
#26
HALLANDALE BEACH, FL 33009

New Mailing Address:

FEI Number: 20-2382723 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HARTLEY, TIMOTHY M
500 SE SIXTH STREET, SUITE 102
FT. LAUDERDALE, FL 33301 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: MGRM () Delete
Name: STACHEWITSCH, ANDRE
Address: 800 E. HALLANDALE BEACH BLVD.
City-St-Zip: HALLANDALE BEACH, FL 33009

Title: MGRM () Delete
Name: STACHEWITSCH, MARC
Address: 800 E. HALLANDALE BEACH BLVD., #26
City-St-Zip: HALLANDALE, FL 33009

Title: MGRM () Delete
Name: FRIEDEWALD, DON E
Address: 800 E. HALLANDALE BEACH BLVD., #26
City-St-Zip: HALLANDALE BEACH, FL 33009

Title: MGRM () Delete
Name: LERNER, HOLLY
Address: 800 EAST HALLANDALE BEACH BLVD. #26
City-St-Zip: HALLANDALE BEACH, FL 33009

ADDITIONS/CHANGES:

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

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

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 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: DON E FRIEDEWALD

MGRM

04/16/2006

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