2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000093479

Entity Name: SALT LIFE HOLDINGS, LLC

FILED Apr 29, 2009 Secretary of State

Current Principal Place of Business: New Principal Place	of Business:
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13051 BEACH BOULEVARD 13051 BEACH BOULEVARD

JACKSONVILLE, FL 32246 US STE 300

JACKSONVILLE, FL 32246 US

Current Mailing Address: New Mailing Address:

13051 BEACH BOULEVARD 13051 BEACH BOULEVARD

JACKSONVILLE, FL 32246 US STE 300

JACKSONVILLE, FL 32246 US

FEI Number: 20-2067854 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

COMBS, ROGER L 13051 BEACH BLVD. SUITE 300 JACKSONVILLE, FL 32246 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:

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

Title: MGRM () Delete Title: () Change () Addition

 Title:
 MGRM () Delete
 Title:

 Name:
 COMBS, ROGER
 Name:

 Address:
 2473 DEN STREET
 Address:

City-St-Zip: ST. AUGUSTINE, FL 32092 US City-St-Zip:

Title: MGRM () Delete Title: () Change () Addition

 Name:
 COMBS, DONALD
 Name:

 Address:
 3870 COASTAL HIGHWAY
 Address:

 City-St-Zip:
 ST. AUGUSTINE, FL 32084 US
 City-St-Zip:

Title: MGRM () Delete Title: () Change () Addition Name: THOMPSON, RICHARD Name:

Address: 1171 BEACH BLVD Address: City-St-Zip: JACKSONVILLE BEACH, FL 32250 US City-St-Zip:

Title: MGRM (X) Delete Title: () Change () Addition

 Name:
 MOORE, MICHAEL
 Name:

 Address:
 208 BELEVEDERE STREET
 Address:

 City-St-Zip:
 ATLANTIC BEACH, FL 32250 US
 City-St-Zip:

Title: MGRM (X) Delete Title: () Change () Addition

 Name:
 HUTTO, MICHAEL T
 Name:

 Address:
 3904 LANDFALL LANE WEST
 Address:

 City-St-Zip:
 JACKSONVILLE BEACH, FL 32250 US
 City-St-Zip:

Title: MGRM (X) Delete Title: () Change () Addition

 Name:
 CYBERCOM INTERNATIONAL CORPORATION
 Name:

 Address:
 4309 PABLO OAKS COURT, STE.THREE
 Address:

 City-St-Zip:
 JACKSONVILLE, FL 32224 US
 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: ROGER L COMBS MGR 04/29/2009