

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000030360

FILED
Apr 28, 2009
Secretary of State

Entity Name: SLC, LLC

Current Principal Place of Business:

7733 GROVES ROAD
NAPLES, FL 34109 US

New Principal Place of Business:

Current Mailing Address:

7733 GROVES ROAD
NAPLES, FL 34109 US

New Mailing Address:

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CARABBA, ARCHIE
7733 GROVES ROAD
NAPLES, FL 34109 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: SEEGMULLER, WILLIAM
Address: 2803 SW 39TH TERRACE
City-St-Zip: CAPE CORAL, FL 33914 US

Title: MGRM () Delete
Name: CARABBA, ARCHIE
Address: 7733 GROVES ROAD
City-St-Zip: NAPLES, FL 34109 US

Title: MGRM () Delete
Name: LETIZIA, FRANK
Address: 402 ONCREST TERRACE
City-St-Zip: CLIFFSIDE PARK, NJ 07010

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:

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: ARCHIE CARABBA

SECR

04/28/2009

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