

# 2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000047588

FILED  
Apr 13, 2011  
Secretary of State

Entity Name: SLG HOLZ, LLC

**Current Principal Place of Business:**

4315 PABLO OAKS COURT  
SUITE 1  
JACKSONVILLE, FL 32224

**New Principal Place of Business:**

**Current Mailing Address:**

4315 PABLO OAKS COURT  
SUITE 1  
JACKSONVILLE, FL 32224

**New Mailing Address:**

FEI Number: 20-2848141

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

HOLZ, F. LOGAN  
4315 PABLO OAKS COURT  
SUITE 1  
JACKSONVILLE, FL 32224 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: PCEO  
Name: HOLZ, F. LOGAN  
Address: 4315 PABLO OAKS COURT, SUITE 1  
City-St-Zip: JACKSONVILLE, FL 32224 US

Title: CHMN  
Name: STOKES, E. CHESTER JR  
Address: 4315 PABLO OAKS COURT  
City-St-Zip: JACKSONVILLE, FL 32224 US

Title: VP  
Name: KUNKEL, JOHN C  
Address: 4315 PABLO OAKS COURT  
City-St-Zip: JACKSONVILLE, FL 32224 US

Title: VPSE  
Name: HOLM, MALLORY G  
Address: 4315 PABLO OAKS COURT  
City-St-Zip: JACKSONVILLE, FL 32224 US

Title: VPTR  
Name: FREDENHAGEN, SHARON W  
Address: 4315 PABLO OAKS COURT  
City-St-Zip: JACKSONVILLE, FL 32224 US

Title: AS  
Name: LAWARRE, JOY L  
Address: 4315 PABLO OAKS CRT  
City-St-Zip: JACKSONVILLE, FL 32224 US

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: F. LOGAN HOLZ

PCEO

04/13/2011

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