

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L05000096952

Entity Name: S&L CONSULTING LLC

**FILED**  
**Feb 23, 2010**  
**Secretary of State**

**Current Principal Place of Business:**

428 CHILDRESS ST.  
PMB #7642  
PENSACOLA, FL 32534 US

**New Principal Place of Business:**

**Current Mailing Address:**

428 CHILDRESS ST.  
PMB #7642  
PENSACOLA, FL 32534 US

**New Mailing Address:**

FEI Number: 41-2100768

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

USA-RA LLC  
841 PRUDENTIAL DRIVE  
12TH FLOOR  
JACKSONVILLE, FL 32207 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  
Name: FREEMAN, LEON  
Address: PMB 7642, PO BOX 2428  
City-St-Zip: PENSACOLA, FL 32513 US

Title: MGRM  
Name: FREEMAN, SANDI  
Address: PMB 7642, PO BOX 2428  
City-St-Zip: PENSACOLA, FL 32513 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: LEON FREEMAN

VP

02/23/2010

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