

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000036203

FILED
May 03, 2008
Secretary of State

Entity Name: SLOPESIDE PROPERTIES, LLC

Current Principal Place of Business:

760 MAGNOLIA CREEK CIRCLE
ORLANDO, FL 32828

New Principal Place of Business:

Current Mailing Address:

760 MAGNOLIA CREEK CIRCLE
ORLANDO, FL 32828

New Mailing Address:

FEI Number: 74-3209540 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

DVORES, HARRIS N ESQ
5141 GARLANGER TRAIL
OVIEDO, FL 32765 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:

Title: MGR () Delete
Name: NARVAEZ, STEVE
Address: 760 MAGNOLIA CREEK CIRCLE
City-St-Zip: ORLANDO, FL 32828

Title: MGR () Delete
Name: HILLERMAN, ERIC
Address: 460 CROFTON DR
City-St-Zip: OCOEE, FL 34761

Title: MGR () Delete
Name: TROTTER, GARY
Address: 1800 TAYLOR AVE
City-St-Zip: WINTER PARK, FL 32789

Title: MGR () Delete
Name: HILLERMAN, EARL
Address: 152 SEVILLE CHASE DR.
City-St-Zip: WINTER SPRINGS, FL 32708

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 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: STEVE NARVAEZ

MGR

05/03/2008

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