

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L07000103193

**Entity Name:** SLOPAY, LLC

**FILED**  
**Feb 22, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

5600 EFFIE DR  
APOPKA, FL 327125114 US

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 287  
SORRENTO, FL 32776 US

**New Mailing Address:**

**FEI Number:** 26-1209335

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

STARK, CINDY  
1729 N. DAYTONA AVE.  
FLAGLER BEACH, FL 32136 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:** STARK, CINDY  
**Address:** 1729 N. DAYTONA AVE.  
**City-St-Zip:** FLAGLER BEACH, FL 32136 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: CINDY STARK

MS.

02/22/2011

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