

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000076388

Entity Name: SL MANAGEMENT GROUP, LLC

FILED
May 04, 2009
Secretary of State

Current Principal Place of Business:

1601 PARK CENTER DR
8
ORLANDO, FL 32835 US

New Principal Place of Business:

Current Mailing Address:

1601 PARK CENTER DR
8
ORLANDO, FL 32835 US

New Mailing Address:

FEI Number: 26-3105473 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:

SCHIAVO, RODRIGO B
1601 PARK CENTER DR.
8
ORLANDO, FL 32835 US

Name and Address of New Registered Agent:

KLEINE, JULIANA S
1601 PARK CENTER DR.
8
ORLANDO, FL 32835 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: JULIANA KLEINE

05/04/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: PD () Delete
Name: SCHIAVO, RODRIGO B
Address: 164 SAGECREST DRIVE
City-St-Zip: OCOEE, FL 34761 US

Title: V (X) Delete
Name: SCHIAVO, MOANA A
Address: 164 SAGECREST DRIVE
City-St-Zip: ORLANDO, FL 34761 US

ADDITIONS/CHANGES:

Title: PD (X) Change () Addition
Name: KLEINE, JULIANA S
Address: 711 BUCKHAVEN LOOP
City-St-Zip: OCOEE, FL 34761 US

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: JULIANA KLEINE

PD

05/04/2009

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