

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L09000083327

Entity Name: PAPA SLIM'S LLC

**FILED**  
**Jul 05, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

204 PALMETTO AVENUE  
ANNA MARIA, FL 34216

**New Principal Place of Business:**

**Current Mailing Address:**

POST OFFICE BOX 81  
ANNA MARIA, FL 34216

**New Mailing Address:**

FEI Number: 27-0784717

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

SHAHINIAN, LAURETTE  
204 PALMETTO AVENUE  
ANNA MARIA, FL 34216 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: SHAHINIAN, LAURETTE  
Address: PO BOX 81  
City-St-Zip: ANNA MARIA, FL 34216

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: LAURETTE SHAHINIAN

MGR

07/05/2011

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