

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L10000049071

Entity Name: SLIDER DOCTOR LLC

**FILED**  
**Apr 12, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

9539 GLADIOLUS PRESERVE CIRCLE  
FT MYERS, FL 33908

**New Principal Place of Business:**

**Current Mailing Address:**

9539 GLADIOLUS PRESERVE CIRCLE  
FT MYERS, FL 33908

**New Mailing Address:**

FEI Number: 80-0685075

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

TATA, MARIA R  
9539 GLADIOLUS PRESERVE CIRCLE  
FT MYERS, FL 33908 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: MGR  
Name: TATA, MARIA R  
Address: 9539 GLADIOLUS PRESERVE CIRCLE  
City-St-Zip: FT MYERS, FL 33908 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: MARIA R. TATA

MGR

04/12/2012

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