

**2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M09000003293

**FILED  
Apr 20, 2011  
Secretary of State**

**Entity Name:** SLEEPY'S, LLC

**Current Principal Place of Business:**

1000 SOUTH OYSTER BAY ROAD  
HICKSVILLE, NY 11801

**New Principal Place of Business:**

**Current Mailing Address:**

1000 SOUTH OYSTER BAY ROAD  
HICKSVILLE, NY 11801

**New Mailing Address:**

**FEI Number:** 20-8781144

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 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: ACKER, HARRY  
Address: 1000 SOUTH OYSTER BAY ROAD  
City-St-Zip: HICKSVILLE, NY 11801

Title: CFO  
Name: GRACI, JOSEPH  
Address: 1000 SOUTH OYSTER BAY ROAD  
City-St-Zip: HICKSVILLE, NY 11801

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: JOSEPH GRACI

CFO

04/20/2011

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