

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000066958

Entity Name: S&L ANCHOR GROUP, INC.

FILED
Apr 21, 2009
Secretary of State

Current Principal Place of Business:

14081 EAGLE RIDGE LAKES DR
SUITE 202
FORT MYERS, FL 33912

New Principal Place of Business:

Current Mailing Address:

PO BRAWER 60205
C/O JOHN M WICKER, P.A
FORT MYERS, FL 33906

New Mailing Address:

C/O JOHN M. WICKER, P.A.
P.O. DRAWER 60205
FORT MYERS, FL 33906

FEI Number: 36-4573817

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WICKER P.A., JOHN M
12670 NEW BRITTANY BLVD , STE 101
FT. MYERS, FL 33907 US

Name and Address of New Registered Agent:

WICKER, JOHN M
12670 NEW BRITTANY BLVD , STE 101
FORT MYERS, FL 33907 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: JOHN M. WICKER

04/21/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: GILMAN, SPAID I
Address: 14081 EAGLE RIDGE LAKES DR., #202
City-St-Zip: FT. MYERS, FL 33912

Title: ST () Delete
Name: GILMAN, LINDA K
Address: 14081 EAGLE RIDGE LAKES DR., #202
City-St-Zip: FT. MYERS, FL 33912

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change () Addition
Name: GILMAN, SPAID I
Address: 14081 EAGLE RIDGE LAKES DR., #202
City-St-Zip: FT. MYERS, FL 33912

Title: DST (X) Change () Addition
Name: GILMAN, LINDA K
Address: 14081 EAGLE RIDGE LAKES DR., #202
City-St-Zip: FT. MYERS, FL 33912

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 or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: S. I. GILMAN

DP

04/21/2009

Electronic Signature of Signing Officer or Director

Date