2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000115564

Entity Name: SHYC SLIP, INC.

FILED Feb 05, 2010 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

354 PEQOUT AVENUE 354 PEQOUT AVENUE SOUTH PORT, CT 06890 SOUTHPORT, CT 06890

Current Mailing Address: New Mailing Address:

354 PEQOUT AVENUE 354 PEQOUT AVENUE SOUTH PORT, CT 06890 SOUTHPORT, CT 06890

FEI Number: FEI Number Applied For (X) FEI Number Not Applicable () Certificate of Status Desired ()

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

MOORE & COMPANY SECRETARIES, INC.

355 ALHAMBRA CIRCLE
SUITE 1100
MIAMI, FL 33134 US

MOORE & CO., P.A.
355 ALHAMBRA CIRCLE
SUITE 1100
MIAMI, FL 33134 US

MOORE & CO., P.A.
355 ALHAMBRA CIRCLE
SUITE 1100
MIAMI, FL 33134 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: MICHAEL T. MOORE 02/05/2010

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title:

 Name:
 MURPHY, DAVID B

 Address:
 354 PEQOUT AVENUE

 City-St-Zip:
 SOUTHPORT, CT 06890

Title: VP

Name: MURPHY, DAVID B
Address: 354 PEQOUT AVENUE
City-St-Zip: SOUTHPORT, CT 06890

Title: T

 Name:
 MURPHY, DAVID B

 Address:
 354 PEQOUT AVENUE

 City-St-Zip:
 SOUTHPORT, CT 06890

Title:

 Name:
 MURPHY, DAVID B

 Address:
 354 PEQOUT AVENUE

 City-St-Zip:
 SOUTHPORT, CT 06890

I hereby 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 all other like empowered.

SIGNATURE: DAVID B. MURPHY P 02/05/2010