

# **2010 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P95000050174

Entity Name: SLICER'S, INC.

**FILED**  
**Apr 27, 2010**  
**Secretary of State**

**Current Principal Place of Business:**

16970-E SAN CARLOS BLVD.  
FORT MYERS, FL 33908

**New Principal Place of Business:**

**Current Mailing Address:**

16970-E SAN CARLOS BLVD.  
FORT MYERS, FL 33908

**New Mailing Address:**

FEI Number: 65-0595885

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

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

ATWOOD, NANCY  
1416 LOMA LINDA DR  
FORT MYERS, FL 33919 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

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: PTD  
Name: ATWOOD, ALAN W  
Address: 1416 LOMA LINDA DR  
City-St-Zip: FORT MYERS, FL 33919

Title: VSD  
Name: ATWOOD, NANCY R  
Address: 1416 LOMA LINDA DR  
City-St-Zip: FORT MYERS, FL 33919

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: ALAN W. ATWOOD

PRES

04/27/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date