

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# S96964

Entity Name: SLINGERLAND'S, INC.

**FILED**  
**Jan 12, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

175 S. ORCHARD STREET  
ORMOND BEACH, FL 32174

**New Principal Place of Business:**

**Current Mailing Address:**

175 S. ORCHARD STREET  
ORMOND BEACH, FL 32174

**New Mailing Address:**

FEI Number: 59-3095125

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

PAYNE, CHRISTOPHER  
175 S. ORCHARD STREET  
ORMOND BEACH, FL 32174 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

**OFFICERS AND DIRECTORS:**

Title: PRES  
Name: PAYNE, CHRISTOPHER  
Address: 175 S. ORCHARD STREET  
City-St-Zip: ORMOND BEACH, FL 32174

Title: VP  
Name: PAYNE, SHERRI  
Address: 175 S ORCHARD STREET  
City-St-Zip: ORMOND BCH, FL 32174

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: CHRISTOPHER PAYNE

PRES

01/12/2011

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

\_\_\_\_\_  
Date