

**2013 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P11000027619

**Entity Name:** SLH VENTURES, INC.

**Current Principal Place of Business:**

265 EDGE OF WOODS ROAD  
ST. AUGUSTINE, FL 32092

**Current Mailing Address:**

265 EDGE OF WOODS ROAD  
ST. AUGUSTINE, FL 32092

**FEI Number:** 45-1010608

**Certificate of Status Desired:** No

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

QUINN, JOSEPH  
265 EDGE OF WOODS ROAD  
AT AUGUSTINE, FL 32092 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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Officer/Director Detail :**

Title VPST  
Name QUINN, JOSEPH  
Address 265 EDGE OF WOODS ROAD  
City-State-Zip: ST. AUGUSTINE FL 32092

Title D  
Name QUINN, JOSEPH  
Address 265 EDGE OF WOODS ROAD  
City-State-Zip: ST. AUGUSTINE FL 32092

Title PD  
Name QUINN, TIMOTHY  
Address 1608 CALABRIA COURT  
City-State-Zip: ST. AUGUSTINE FL 32092

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:** JOSEPH F QUINN

VP

02/17/2013

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date