# 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 a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

PRESIDENT

SIGNATURE: PAMELA F. LEONARD

ADAMS, DAVID W 1925 E. SECOND AVE. TAMPA, FL 33605 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

### Authorized Person(s) Detail :

Title	MGRM	Title	MGRM
Name	LEONARD, PAMELA F	Name	LEONARD, JAMES J
Address	3559 BLUEBERRY DRIVE	Address	3559 BLUEBERRY DRIVE
City-State-Zip:	LAKELAND FL 33811	City-State-Zip:	LAKELAND FL 33811

DOCUMENT# L11000023196 Entity Name: SILVER LEAF KITCHEN AND BATH, LLC

2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

Current Principal Place of Business:

1818 HARDEN BLVD SUITE 110 LAKELAND, FL 33803

# **Current Mailing Address:**

3559 BLUEBERRY DRIVE LAKELAND, FL 33811

## FEI Number: 27-5122949

## Name and Address of Current Registered Agent:

Electronic Signature of Signing Authorized Person(s) Detail

FILED Feb 25, 2014 Secretary of State CC5168424376

Certificate of Status Desired: No

Date

02/25/2014 Date