

2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L12000127564

Entity Name: SLUTLIFE LLC.

Current Principal Place of Business:

4758 HARBORTOWN LANE
FORT MYERS, FL 33919

Current Mailing Address:

4758 HARBORTOWN LANE
FORT MYERS, FL 33919

FEI Number: 46-1260321

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

ROSSANO, TIMOTHY JOHN
4758 HARBORTOWN LANE
FORT MYERS, FL 33919 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

Authorized Person(s) Detail :

Title MGRM
Name ROSSANO, TIMOTHY J
Address 4758 HARBORTOWN LANE
City-State-Zip: FORT MYERS FL 33919

Title MGRM
Name RUSSELL, ANTHONY J
Address 4400 HILL DRIVE
City-State-Zip: FT. MYERS FL 33901

Title MGRM
Name ROBB, CHARLES L
Address 2713 57TH STREET WEST
City-State-Zip: LEHIGH ACRES FL 33971

Title MGRM
Name FOEDERER, JAMES F
Address 5333 COBALT COURT
City-State-Zip: CAPE CORAL FL 33904

Title MGRM
Name RAINONE, JOSEPH A
Address 40 DORCHESTER AVENUE
City-State-Zip: PROVIDENCE RI 02909

Title MGRM
Name COLE, KENNETH EJR.
Address 18235 WILDCAT ROAD
City-State-Zip: OLATHE KS 66062

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.

SIGNATURE: TIMOTHY J ROSSANO

REGISTERED AGENT

03/11/2014

Electronic Signature of Signing Authorized Person(s) Detail

Date