



State of Rhode Island and Providence Plantations
Office of the Secretary of State

Fee: \$50.00

Division Of Business Services
148 W. River Street
Providence RI 02904-2615
(401) 222-3040

**Limited Liability Company
Annual Report**

Filing Period: September 1 - November 1

In accordance with R.I.G.L. 7-16-66(d), each limited liability company failing or refusing to file its annual report within thirty (30) days after the time prescribed by law (R.I.G.L. 7-16-66(b&c)) is subject to a penalty fee of \$25.00.

ANNUAL REPORT YEAR: 2013

1. ID No. 000790033

2. Exact Name of the Limited Liability Company S-L Routes, LLC

3. State of Formation

State: PA

4. Brief Description of the Character of the Business Which is Actually Conducted in Rhode Island

ROUTE MGMT

5. Principal Office Address

No. and Street: 13024 BALLANTYNE CORP PL
SUITE 900

City or Town: CHARLOTTE State: NC Zip: 28277 Country: USA

6. Mailing Address of Limited Liability Company and Name or Title of Contact Person:

Contact Name: Contact Title:

No. and Street: PO BOX 32368

City or Town: CHARLOTTE State: NC Zip: 28277 Country: USA

**7. Name and Address of Each Manager of the Limited Liability Company, if Applicable.
DO NOT LIST MEMBERS**

Title	Individual Name First, Middle, Last, Suffix	Address Address, City or Town, State, Zip Code, Country
MANAGER	MARGARET E WICKLUND	13024 BALLANTYNE CORP PL #900 CHARLOTTE, NC 28277 USA
MANAGER	CARL E LEE JR	13024 BALLANTYNE CORP PL #900 CHARLOTTE, NC 28277 USA
MANAGER	CHARLES E GOOD	13024 BALLANTYNE CORP PL CHARLOTTE, NC 28277 USA
MANAGER	MICHAEL C ANDERSON	13024 BALLANTYNE CORP PL #900 CHARLOTTE, NC 28277 USA

MANAGER	TROY W BRYCE	13024 BALLANTYNE CORP PL #900 CHARLOTTE, NC 28277 USA
MANAGER	RICK D. PUCKETT	13024 BALLANTYNE CORPORATE PLACE, HARRIS BLDG. STE 900 CHARLOTTE, NC 28277 USA
MANAGER	A ZACHARY SMITH III	13024 BALLANTYNE CORP PL #900 CHARLOTTE, NC 28277 USA

**8. RESIDENT AGENT IN RHODE ISLAND - DO NOT ALTER
Changes Require Filing of Form 642 - R.I.G.L. 7-16-11**

REGISTERED AGENT SOLUTIONS, INC. 222 JEFFERSON BOULEVARD, SUITE 200 WARWICK , RI 02888

9. This report must be executed by an authorized person pursuant to R.I.G.L. 7-16-66 (b).

Signed this 24 Day of October, 2013 at 1:16:48 PM by the authorized person. *This electronic signature of the individual or individuals signing this instrument constitutes the affirmation or acknowledgement of the signatory, under penalties of perjury, that this instrument is that individual's act and deed or the act and deed of the company, and that the facts stated herein are true, as of the date of the electronic filing, in compliance with R.I. Gen. Laws § 7-16.*

By MARGARET E WICKLUND
Signature of Authorized Person

Form No. 632
Revised 09/07

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