

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 731279

FILED
Jan 06, 2006
Secretary of State

Entity Name: SCARC, INC.

Current Principal Place of Business:

213 W MCCOLLUM AVE
BUSHNELL, FL 33513

New Principal Place of Business:

Current Mailing Address:

213 W MCCOLLUM AVE
BUSHNELL, FL 33513

New Mailing Address:

FEI Number: 59-1556200

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

THORNTON, RANDALL N
E. HIGHWAY 470
LAKE PANASOFFKEE, FL 33538 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: BM () Delete
Name: SLATE, ED
Address: 506 WEST NOBLE AVE LOT 193
City-St-Zip: BUSHNELL, FL 33513

Title: P () Delete
Name: LORD, DEBORAH
Address: 339 YOUNG CIRCLE
City-St-Zip: WILDWOOD, FL 34785

Title: D () Delete
Name: JOHNSON, MERILYN
Address: 4195 C 575
City-St-Zip: BUSHNELL, FL 33513

Title: S () Delete
Name: ADAMS, LINDA
Address: PO BOX 134
City-St-Zip: BUSNELL, FL 33513

Title: VP () Delete
Name: HUDDLESTON, BILL,
Address: PO BOX 1497
City-St-Zip: BUSHNELL, FL 33513

Title: T () Delete
Name: GOOD, LARRY
Address: 12230 SW 43RD TERRACE
City-St-Zip: WEBSTER, FL 33597

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VP (X) Change () Addition
Name: FOOTE, JUDY
Address: PO BOX 431
City-St-Zip: WEBSTER, FL 34785

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: DEBORAH LORD

PRES

01/06/2006

Electronic Signature of Signing Officer or Director

Date