

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # F93000005197

1. Entity Name
SERVICE CONTRACT INDUSTRY COUNCIL, INC.



Principal Place of Business
204 SOUTH MONROE STREET
TALLAHASSEE, FL 32301

Mailing Address
204 SOUTH MONROE STREET
TALLAHASSEE, FL 32301

2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

04162008 Chg-NP CR2E037 (12/06)

4. FEI Number
59-3190625

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

MEENAN, TIMOTHY J
204 SOUTH MONROE STREET
TALLAHASSEE, FL 32301

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

Filing Fee is \$61.25
Due by May 1, 2008

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make check payable to
Florida Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE PD ☐ Delete
NAME BROOKS, R. STEVEN
STREET ADDRESS 6303 BLUE LAGOON DR., STE. 225
CITY-ST-ZIP MIAMI, FL 33126

TITLE ☐ Change ☐ Addition
NAME 100125337731
STREET ADDRESS 04/24/08--01001--002 **122.50
CITY-ST-ZIP

TITLE D ☐ Delete
NAME LIGHTFOOT, MARK
STREET ADDRESS 889 RIDGE LAKE BLVD
CITY-ST-ZIP MEMPHIS ESTATES, TN 38120

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE D ☒ Delete
NAME GIALLEONARDO, SIMRUN
STREET ADDRESS 22660 EXECUTIVE DRIVE STE 122
CITY-ST-ZIP STERLING, VA 20166

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE D ☐ Delete
NAME Frank LaVaglia
STREET ADDRESS 175 Water Street, 20th Floor
CITY-ST-ZIP New York, NY 10038

TITLE ☐ Change ☒ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

R. Steven Brooks

R. Steven Brooks

4-22-08

305-266-5665 Ext. 1305

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #