2011 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 09, 2011
Secretary of State

DOCUMENT# P01000031929

Entity Name: S.C.P.S., INC.

Current Principal Place of Business:

535 CARSWELL AVENUE
HOLLY HILL, FL 32117

New Principal Place of Business:

1315 LPGA BLVD
SUITE B
HOLLY HILL, FL 32117

Current Mailing Address:

P.O. BOX 730719
ORMOND BEACH, FL 32173

New Mailing Address:

FEI Number: 59-3718900 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SIZEMORE, CLAUDIA
195 COUNTRY CIRCLE DRIVE EAST
PORT ORANGE, FL 32128 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: D
Name: SIZEMORE, CLAUDIA
Address: 195 COUNTRY CIRCLE DRIVE EAST
City-St-Zip: PORT ORANGE, FL 32128

Title: PST
Name: SIZEMORE, SCOTT
Address: P.O. BOX 731943
City-St-Zip: ORMOND BEACH, FL 32173

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 an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: SCOTT SIZEMORE PST 03/09/2011

Electronic Signature of Signing Officer or Director Date