

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000077467

FILED
Apr 30, 2008
Secretary of State

Entity Name: SCOTT'S MOVING AND DELIVERY, INC.

Current Principal Place of Business:

5290 ERIKA PLACE
LAKE WORTH, FL 33463

New Principal Place of Business:

6289 LEAR DRIVE
#405
LANTANA, FL 33462

Current Mailing Address:

6393 LANTANA PINES DRIVE
LANTANA, FL 33462

New Mailing Address:

415 DOWN UNDER DRIVE
JASPER, GA 30143

FEI Number: 52-2371679

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MORSE, VALERIE
6393 LANTANA PINES DRIVE
LANTANA, FL 33462 US

Name and Address of New Registered Agent:

MORSE, VALERIE
6289 LEAR DRIVE
#405
LANTANA, FL 33462 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: VALERIE MORSE

04/30/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: MORSE, SCOTT
Address: 6393 LANTANA PINES DRIVE
City-St-Zip: LANTANA, FL 33462

Title: VP () Delete
Name: MORSE, VALERIE
Address: 6393 LANTANA PINES DRIVE
City-St-Zip: LANTANA, FL 33462

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: MORSE, SCOTT
Address: 415 DOWN UNDER DRIVE
City-St-Zip: JASPER, GA 30143

Title: VP (X) Change () Addition
Name: MORSE, VALERIE
Address: 415 DOWN UNDER DRIVE
City-St-Zip: JASPER, GA 30143

I hereby certify that the information supplied with this filing does not qualify 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: VALERIE MORSE

VP

04/30/2008

Electronic Signature of Signing Officer or Director

Date