

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 739555

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

FILED
Apr 15, 2009
Secretary of State

Current Principal Place of Business:

2700 CORAL SPRINGS DRIVE
UNIT 113
CORAL SPRINGS, FL 33065 US

New Principal Place of Business:

Current Mailing Address:

2700 CORAL SPRINGS DRIVE
UNIT 113
CORAL SPRINGS, FL 33065 US

New Mailing Address:

FEI Number: 59-1876569

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SCHAEFER, LINDA
2700 CORAL SPRINGS DRIVE
UNIT 111
CORAL SPRINGS, FL 33065 US

Name and Address of New Registered Agent:

KATZ, MARCI
2700 CORAL SPRINGS DRIVE
UNIT 113
CORAL SPRINGS, FL 33065 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: MARCI KATZ

04/15/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: KATZ, MARCI
Address: 2700 CORAL SPRINGS DRIVE UNIT 113
City-St-Zip: CORAL SPRINGS, FL 33065

Title: VP () Delete
Name: SCHAEFER, LINDA
Address: 2700 CORAL SPRINGS DRIVE UNIT 111
City-St-Zip: CORAL SPRINGS, FL 33065

Title: T (X) Delete
Name: ZELLER, GUILLERMO
Address: 2700 CORAL SPRINGS DRIVE UNIT 113
City-St-Zip: CORAL SPRINGS, FL 33065

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: VP (X) Change () Addition
Name: ZELLER, GUILLERMO
Address: 2700 CORAL SPRINGS DRIVE UNIT 113
City-St-Zip: CORAL SPRINGS, FL 33065

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

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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MARCI KATZ

P

04/15/2009

Electronic Signature of Signing Officer or Director

Date