

FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT  
CORPORATION  
ANNUAL REPORT  
1997



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

FILED  
Mar 04 1997 8:00am  
Secretary of State

DOCUMENT # F93000003247 (4)

1. Corporation Name  
SCA SUCCESSOR, INC.

Principal Place of Business  
218 NORTH CHARLES ST.  
SUITE 500  
BALTIMORE MD 21201

Mailing Address  
218 NORTH CHARLES ST.  
SUITE 500  
BALTIMORE MD 21201-4019



2. Principal Place of Business

21  
Sole, Apt. #, etc.

22  
City & State

23  
Zip Country

24  
Country

2a. Mailing Address

26  
Suite, Apt. #, etc.

27  
City & State

28  
Zip Country

29  
Country

9. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM  
1200 S. PINE ISLAND RD.  
PLANTATION FL 33324

3. Date Incorporated or Qualified  
07/06/1993

3a. Date of Last Report  
03/05/1996

4. FEI Number  
~~52-1618424~~ 52-1618429  
Applied For  
Not Applicable

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

6. Election Campaign Financing  
Trust Fund Contribution ☐ \$5.00 May Be  
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,  
Florida Statutes ☐ Yes ☐ No

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature type or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	DELETE
DC	CARLSON, GARRETT G	4501 TAMiami TRAIL NORTH, STE. 218	NAPLES FL 33940	<input type="checkbox"/>
DPT	JOSEPH, MARK K	218 N. CHARLES ST., STE. 500	BALTIMORE MD 21201	<input type="checkbox"/>
VPS	DUKER, MARILYNN K	218 N. CHARLES ST., STE. 500	BALTIMORE MD 21201	<input type="checkbox"/>
VPD	HOBBS, THOMAS R	218 NORTH CHARLES STREET, SUITE 500	BALTIMORE MD	<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	Change	Addition
DC	Carlson, Garrett G	1330 Galleon Drive	Naples, FL 34102-7112	<input checked="" type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 607, Florida Statutes; and that my name appears in Block 12 or Block 13, changed, or on an attachment with an address.

SIGNATURE

Thomas R. Hobbs, Senior Vice President

2/5/97

(410) 962-8044

Date

Daytime Phone #

CR2E034 (9/96)