## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# F95000000926

Entity Name: S-COVE CORP.

Address:

City-St-Zip:

4060 BARRANCAS AVENUE

PENSACOLA, FL 32507

FILED Feb 06, 2009 Secretary of State

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Current P	rincipal Place	of Business:	New Principal Pla	New Principal Place of Business:	
3500 S DL DOVER, D	JPONT HWY. DE 19901				
Current Mailing Address:			New Mailing Add	New Mailing Address:	
	RANCAS AVE. DLA, FL 32507				
FEI Number	: 51-0333743	FEI Number Applied For ( )	FEI Number Not Applicable ( )	Certificate of Status Desired ( )	
Name and	Address of C	urrent Registered Agent:	Name and Addres	s of New Registered Agent:	
4060 BAR	N, CAROL B RANCAS AVEI DLA, FL 32507				
	named entity s e of Florida.	submits this statement for the	purpose of changing its registe	ered office or registered agent, or both,	
SIGNATUI	RE:				
	Electron	ic Signature of Registered A	gent	Date	
Election Car	mpaign Financing	Trust Fund Contribution ( ).			
OFFICERS AND DIRECTORS:			ADDITIONS/CHAP	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	PSD () HARRISON, CA 4060 BARRANC PENSACOLA, F	AS AVENUE	Title: Name: Address: City-St-Zip:	( ) Change( ) Addition	
Title: Name:	VTD () HESS, M.W.	Delete	Title: VTD Name: HESS, N	(X) Change ()Addition ∕ARILYN W	

Address:

City-St-Zip:

4060 BARRANCAS AVENUE

PENSACOLA, FL 32507

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: CAROL B HARRISON S 02/06/2009