2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# K18655

FILED Apr 29, 2009 Secretary of State

Entity Name: SCC GROUP HEALTH CLINIC INCORPORATED

Current P	rincipal Place	of Business:	New Principal Place	New Principal Place of Business:	
1601 RICKENBACKER DRIVE					
SUITE #2 SUN CITY	CENTER, FL	33573			
Current M	lailing Addres	s:	New Mailing Addres	New Mailing Address:	
1601 RICKENBACKER DRIVE SUITE #2 SUN CITY CENTER, FL 33573			SUITE #2	1601 RICKENBACKER DRIVE SUITE #2 SUN CITY CENTER, FL 33573	
FEI Number:	: 59-2878713	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and	Address of C	urrent Registered Agent:	Name and Address of	Name and Address of New Registered Agent:	
	ONALD B. CITY CENTER CENTER, FL				
	named entity see of Florida.	submits this statement for the	purpose of changing its registere	d office or registered agent, or both,	
SIGNATUR	RE:				
	Electron	ic Signature of Registered Ag	gent	Date	
Election Car	mpaign Financing	g Trust Fund Contribution ().			
OFFICERS	S AND DIREC	TORS:	ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	DPT () ZAK, ALLEN T 8504 DEE CIRO RIVERVIEW, FI		Title: Name: Address: City-St-Zip:	() Change () Addition	

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: ALLEN T. ZAK PRES 04/29/2009