

# **2009 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L02000011985

**Entity Name:** S CURVE HOLDINGS, LLC

**FILED**  
**Mar 19, 2009**  
**Secretary of State**

**Current Principal Place of Business:**

206 SW 10TH ST  
OCALA, FL 34474 US

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 6  
OCALA, FL 344780006

**New Mailing Address:**

**FEI Number:** 02-0605846

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

MACKAY, DAVID L ESQUIRE  
2801 SOUTHWEST COLLEGE ROAD, UNIT 9  
OCALA, FL 34474 US

**Name and Address of New Registered Agent:**

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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**MANAGING MEMBERS/MANAGERS:**

**Title:** MGRM ( ) Delete  
**Name:** BROWN, R. SCOT  
**Address:** 206 SOUTHWEST TENTH STREET  
**City-St-Zip:** Ocala, FL 34474 US

**ADDITIONS/CHANGES:**

**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 is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

**SIGNATURE:** ROBERT SCOT BROWN

MM

03/19/2009

\_\_\_\_\_  
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date