2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000066993

Entity Name: S2C2 PROPERTIES, LLC

FILED Feb 01, 2005 Secretary of State

Date

(X) Change () Addition

(X) Change () Addition

Current Principal Place of Business: New Principal Place of Business:

9897 ASHLEY DR. P.O. BOX 8004

SEMINOLEE, FL 33772 SEMINOLE, FL 33775

Current Mailing Address: New Mailing Address:

PO BOX 8004

SEMINOLE, FL 33775

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired ()

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

COUNTS, JOHN W COUNTS, CYNTHIA B 9897 ASHLEY DR. 9897 ASHLEY DR.

SEMINOLEE, FL 33772 US SEMINOLE, FL 33772 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: CYNTHIA B COUNTS 02/01/2005

Title:

Title:

Name:

Address:

Name:

Address:

City-St-Zip:

Electronic Signature of Registered Agent

MANAGING MEMBERS/MEMBERS:

Title: MGRM () Delete Name: SULLIVAN, MATTHEW Address: 9563 118TH LANE

Address: 9563 118TH LANE
City-St-Zip: SEMINOLEE, FL 33772

 Title:
 MGRM () Delete

 Name:
 SULLIVAN, MEAGAN M

 Address:
 9563 118TH LANE

 City-St-Zip:
 SEMINOLEE, FL 33772

 Title:
 MGRM () Delete

 Name:
 COUNTS, CYNTHIA B

 Address:
 9897 ASHLEY DR.

 City-St-Zip:
 SEMINOLEE, FL 33772

Title: MGRM (X) Delete Name: COUNTS, JOHN W Address: 9897 ASHLEY DR.

SEMINOLEE, FL 33772

City-St-Zip:

MINOLEE, FL 33772 City-St-Zip: SEMINOLE, FL 33772

Title: MGRM (X) Change () Addition
Name: COUNTS, CYNTHIA B
Address: 9897 ASHLEY DR.
City-St-Zip: SEMINOLE, FL 33772

MGRM

MGRM

SULLIVAN, MATTHEW

SEMINOLE, FL 33772

SULLIVAN, MEAGAN M

9563 118TH LANE

9563 118TH LANE

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 for the exemption stated in Section 119.07(3)(i), 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: CYNTHIA B COUNTS RA 02/01/2005