

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000003302

Entity Name: SCOVILL & SCOVILL, PLC

FILED
Apr 08, 2008
Secretary of State

Current Principal Place of Business:

1605 MAIN STREET
SUITE 912
SARASOTA, FL 34236 US

New Principal Place of Business:

Current Mailing Address:

1605 MAIN STREET
SUITE 912
SARASOTA, FL 34236 US

New Mailing Address:

FEI Number: 20-8920603

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LAW OFFICES OF H. WILLIAM SCOVILL, P.A.
1605 MAIN STREET
SUITE 912
SARASOTA, FL 34236 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: THE LAW OFFICES OF H. WILLIAM SCOVILL, P.A.
Address: 1605 MAIN STREET, SUITE 912
City-St-Zip: SARASOTA, FL 34236 US

Title: MGRM () Delete
Name: W. BARTLETT SCOVILL, P.A.
Address: 1605 MAIN STREET, SUITE 912
City-St-Zip: SARASOTA, FL 34236 US

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: W. BARTLETT SCOVILL

MGRM

04/08/2008

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