

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

**FILED
Feb 12, 2009
Secretary of State**

DOCUMENT# L05000010060

Entity Name: SCS HOLDINGS, LLC

Current Principal Place of Business:

5589 OKEECHOBEE BLVD
SUITE 102
WEST PALM BEACH, FL 33417

New Principal Place of Business:

Current Mailing Address:

5589 OKEECHOBEE BLVD
SUITE 102
WEST PALM BEACH, FL 33417

New Mailing Address:

FEI Number: 20-2257174 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SISCA, CHARLES
5589 OKEECHOBEE BLVD
SUITE 102
WEST PALM BEACH, FL 33417 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: MGR () Delete
Name: SISCA, CHARLES A
Address: 5589 OKEECHOBEE BLVD, SUITE 102
City-St-Zip: WEST PALM BEACH, FL 33417 US

Title: MGRM () Delete
Name: SISCA, SHERRIE
Address: 5589 OKEECHOBEE BLVD STE 102
City-St-Zip: WEST PALM BEACH, FL 33417

Title: MGRM () Delete
Name: HOLLAND, CHUCK
Address: 5587 OKEECHOBEE BLVD STE 102
City-St-Zip: WEST PALM BEACH, FL 33417

Title: MGRM () Delete
Name: LOVEJOY, ROGER
Address: 5589 OKEECHOBEE BLVD STE 102
City-St-Zip: WEST PALM BEACH, FL 33417

ADDITIONS/CHANGES:

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

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

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: CHARLES SISCA

MGR

02/12/2009

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