

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000044645

FILED
Jan 04, 2008
Secretary of State

Entity Name: SCOTTMAR LLC

Current Principal Place of Business:

16531 SAN EDMUNDO RD.
PUNTA GORDA, FL 33955 US

New Principal Place of Business:

Current Mailing Address:

7430 MAYFLOWER COURT
ST. LEONARD, MD 20685 US

New Mailing Address:

16531 SAN EDMUNDO RD.
PUNTA GORDA, FL 33955

FEI Number: 20-2796393

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HICKMAN, MARCY D OWNER
709 GUILD DRIVE
VENICE, FL 34285 US

Name and Address of New Registered Agent:

HICKMAN, MARCY D OWNER
16531 SAN EDMUNDO RD.
PUNTA GORDA, FL 33955 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:

01/04/2008

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: HICKMAN, MARCY
Address: 7430 MAYFLOWER COURT
City-St-Zip: ST. LEONARD, MD 20685 US

Title: MGRM () Delete
Name: HICKMAN, SCOTT
Address: 7430 MAYFLOWER COURT
City-St-Zip: ST. LEONARD, MD 20685 US

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: HICKMAN, MARCY
Address: 16531 SAN EDMUNDO RD.
City-St-Zip: PUNTA GORDA, FL 33955 US

Title: MGRM (X) Change () Addition
Name: HICKMAN, SCOTT
Address: 16531 SAN EDMUNDO RD.
City-St-Zip: PUNTA GORDA, FL 33955 US

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: MARCY HICKMAN

MGRM

01/04/2008

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