


**2008 LIMITED LIABILITY COMPANY  
ANNUAL REPORT**

**FILED**  
**May 01, 2008 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # L05000093525</b> 1. Entity Name SCLH, LLC	
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Principal Place of Business 1843 OVERLOOK DRIVE MOUNT DORA, FL 32757	Mailing Address 1843 OVERLOOK DRIVE MOUNT DORA, FL 32757
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**DO NOT WRITE IN THIS SPACE**



02192008No Chg-LLC

CR2E083 (12/07)

4. FEI Number 20-3528041	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$5.00</b> Additional Fee Required

6. Name and Address of Current Registered Agent  HUMMELL, LUCY 1843 OVERLOOK DRIVE MOUNT DORA, FL 32757	<b>DO NOT WRITE IN THIS SPACE</b>
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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

**FILE NOW!!! FEE IS \$138.75**  
**After May 1, 2008 Fee will be \$538.75**

U000000936367  
05/27/08-80008-001 138.75

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM HUMMELL, LUCY 1843 OVERLOOK DRIVE MOUNT DORA, FL 32757
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM COUGHTRY, SUE ELLEN 1843 OVERLOOK DRIVE MOUNT DORA, FL 32757
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**DO NOT WRITE  
IN THIS SPACE**

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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:**

*Lucy B. Hummell*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #

4-28-08