2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000110411

Entity Name: SSC ASSOCIATES, LLC

FILED Mar 25, 2009 Secretary of State

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

306 GRAND KEY TERRACE 2110 N. OCEAN BOULEVARD, SUITE 1604 PALM BEACH GARDENS, FL 33418

FORT LAUDERDALE, FL 33305

Current Mailing Address: New Mailing Address:

306 GRAND KEY TERRACE 2110 N. OCEAN BOULEVARD, SUITE 1604

PALM BEACH GARDENS, FL 33418 FORT LAUDERDALE, FL 33305

FEI Number: 03-0610308 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

MULLEN, ARNOLD MULLEN, EDWARD

306 GRAND KEY TERRACE 2110 N. OCEAN BOULEVARD, SUITE 1604 PALM BEACH GARDENS, FL 33418 US FORT LAUDERDALE, FL 33305

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: EDWARD MULLEN 03/25/2009

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

MGRM Title: () Delete (X) Change () Addition

MULLEN, ARNOLD Name: MULLEN, EDWARD Name: 306 GRAND KEY TERRACE Address: 2110 N. OCEAN BOULEVARD, SUITE 1604 Address:

City-St-Zip: PALM BEACH GARDENS, FL 33418 City-St-Zip: FORT LAUDERDALE, FL 33305

Title: MGR () Delete Title: MGR (X) Change () Addition

MULLEN, EDWARD Name: MULLEN, GEOFFREY Name: Address: 306 GRAND KEY TERRACE Address: 8891 VALHALLA DRIVE City-St-Zip: PALM BEACH GARDENS, FL 33418 City-St-Zip: DELRAY BEACH, FL 33446

Title: MGR (X) Delete Title: () Change () Addition

MULLEN, GEOFFREY Name: Name: Address: 306 GRAND KEY TERRACE Address: City-St-Zip: PALM BEACH GARDENS, FL 33418 City-St-Zip:

Title: MGR (X) Delete Title: () Change () Addition

Name: MULLEN, CHERI Name: Address: 306 GRAND KEY TERRACE Address: City-St-Zip: PALM BEACH GARDENS, FL 33418 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: EDWARD MULLEN **MGRM** 03/25/2009