

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000124888

Entity Name: SCALA SERVICES LLC

FILED
Apr 28, 2009
Secretary of State

Current Principal Place of Business:

103 COVINGTON COVE SE
WINTER HAVEN, FL 33880

New Principal Place of Business:

Current Mailing Address:

103 COVINGTON COVE SE
WINTER HAVEN, FL 33880

New Mailing Address:

FEI Number: 06-1833375

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BELL, MATTHEW L CPA
1420 CELEBRATION BLVD
SUITE 200
CELEBRATION, FL 34747 US

Name and Address of New Registered Agent:

BELL, MATTHEW L CPA
109 AMBERSWEET WAY
401
DAVENPORT, FL 33897 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:

04/28/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: CAMPBELL, GEORGINA
Address: 103 COVINGTON COVE SE
City-St-Zip: WINTER HAVEN, FL 33880

Title: MGR () Delete
Name: CAMPBELL, CHRISTOPHER
Address: 103 COVINGTON COVE SE
City-St-Zip: WINTER HAVEN, FL 33880

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: GEORGINA CAMPBELL

MGRM

04/28/2009

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