

# 2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L09000075504

FILED  
Apr 26, 2012  
Secretary of State

**Entity Name:** ALBION SCE, LLC

**Current Principal Place of Business:**

8000 HEALTH CENTER BLVD STE 300  
BONITA SPRINGS, FL 34135

**New Principal Place of Business:**

**Current Mailing Address:**

8000 HEALTH CENTER BLVD STE 300  
BONITA SPRINGS, FL 34135

**New Mailing Address:**

FEI Number: 27-0695785

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

CLASP, INC  
3001 TAMiami TRAIL NORTH STE 400  
NAPLES, FL 34103 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  
Name: ALBION, JANICE  
Address: 13362 TALL GRASS COURT  
City-St-Zip: FORT MYERS, FL 33912

I hereby 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: SALLY PITLYK

AGNT

04/26/2012

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