

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M03000001141

FILED
Apr 25, 2005
Secretary of State

Entity Name: SCZ, LLC

Current Principal Place of Business:

810 BROOKCREEK LANE
KIRKWOOD, MO 63122

New Principal Place of Business:

Current Mailing Address:

810 BROOKCREEK LANE
KIRKWOOD, MO 63122

New Mailing Address:

FEI Number: 92-0193529

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MOORE, RENEE
25301-2 TAMIAMI TRAIL
BONITA SPRINGS, FL 34134 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/MEMBERS:

Title: MGRM () Delete
Name: STEWART, KAREN
Address: 4265 EAST OLD HIGHWAY 100
City-St-Zip: WASHINGTON, MO 63090

Title: MGRM () Delete
Name: STEWART, DENNIS
Address: 4265 EAST OLD HIGHWAY 100
City-St-Zip: WASHINGTON, MO 63090

Title: MGRM () Delete
Name: COLLIER, RON
Address: 652 KILLARY DOWN
City-St-Zip: ST. CHARLES, MO 63304

Title: MGRM () Delete
Name: COLLIER, BILLY
Address: 652 KILLARY DOWN
City-St-Zip: ST. CHARLES, MO 63304

Title: MGRM () Delete
Name: ZYGMUND, MARTIN
Address: 810 BROOKCREEK LANE
City-St-Zip: KIRKWOOD, MO 63122

Title: MGRM () Delete
Name: ZYGMUND, MARCIA
Address: 810 BROOKCREEK LANE
City-St-Zip: KIRKWOOD, MO 63122

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
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Address:
City-St-Zip:

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 for the exemption stated in Section 119.07(3)(i), 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: MARTY ZYGMUND

MGRM

04/25/2005

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