

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M03000001141

FILED
Apr 16, 2006
Secretary of State

Entity Name: SCZ, LLC

Current Principal Place of Business:

810 BROOKCREEK LANE
KIRKWOOD, MO 63122

New Principal Place of Business:

9304 SPRING RUN
BONITA SPRINGS, FL 34134

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:

REESE, BILL
23814 CREEK BRANCH
BONITA SPRINGS, FL 34134 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: BILL REESE

04/16/2006

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

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 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: MARTY ZYGMUND

MGRM

04/16/2006

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