2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 27, 2012
Secretary of State

DOCUMENT# N02000008171

Entity Name: SCOTT CHEERFUL RESIDENT CORP

Current Principal Place of Business:

6781 NW ABIGAIL AVE.
PORT ST LUCIE, FL 34983

New Principal Place of Business:

Current Mailing Address:

6781 NW ABIGAIL AVE.
PORT ST LUCIE, FL 34983

New Mailing Address:

FEI Number: 83-0346028 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SCOTT, LINNETTE R
6781 NW ABIGAIL AVE.
PORT ST LUCIE, FL 34983 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

OFFICERS AND DIRECTORS:

Title: MGRP
Name: ROBINSON, LINNETTE
Address: 6781 NW ABIGAIL AVE.
City-St-Zip: PORT ST LUCIE, FL 34983

Title: AVP
Name: PARCHMENT, CAROL
Address: 21325 NE 8TH PL.#3
City-St-Zip: NORTH MIAMI BEACH, FL 33179

Title: AMD
Name: MCKNIGHT, KEITH
Address: 6781 NW ABIGAIL AVE.
City-St-Zip: PORT ST LUCIE, FL 34983

Title: T
Name: ROBINSON, HENRY
Address: 735 RAINBOW ST
City-St-Zip: PORT SAINT LUCIE, FL 34983

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: LINNETTE ROBINSON D 02/27/2012

Electronic Signature of Signing Officer or Director — Date