2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jun 15, 2007
Secretary of State

DOCUMENT# N06000004153

Entity Name: SCARBOROUGH GROUP HOME, INC.

Current Principal Place of Business:

4722 CEPEDA ST.
ORLANDO, FL 32811

New Principal Place of Business:

Current Mailing Address:

4722 CEPEDA ST.
ORLANDO, FL 32811

New Mailing Address:

FEI Number: **FEI Number Applied For (X)** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

SCARBOROUGH, TAMMY L
1000 ROYAL MARQUISE CIRCLE
OCOEE, FL 34761 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:	ED	( ) Delete
Name:	SCARBOROUGH, OLA	
Address:	4722 CEPEDA ST.	
City-St-Zip:	ORLANDO, FL 32811	
Title:	D	( ) Delete
Name:	SCARBOROUGH, TAMMY L	
Address:	1000 ROYAL MARQUISE CIRCLE	
City-St-Zip:	OCOEE, FL 34761	
Title:	D	( ) Delete
Name:	SCARBOROUGH, SANDRA	
Address:	2924 NW 56TH ST.	
City-St-Zip:	MIAMI, FL 33412	
Title:	D	( ) Delete
Name:	SCARBOROUGH, WENDY	
Address:	2924 NW 56TH ST.	
City-St-Zip:	MIAMI, FL 33412	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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
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 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 an address, with all other like empowered.

SIGNATURE: TAMMY SCARBOROUGH D 06/15/2007

Electronic Signature of Signing Officer or Director — Date