


**2008 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Feb 11, 2008 08:00 AM
Secretary of State

DOCUMENT # P01000028061 1. Entity Name SCOTT SEARCH, INC.	
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Principal Place of Business 100 SUNSET POINT PALATKA, FL 32177	Mailing Address 100 SUNSET POINT PALATKA, FL 32177
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02042008 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-3708491	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent CHILDS, ALLEN D 100 SUNSET POINT PALATKA, FL 32177	DO NOT WRITE IN THIS SPACE
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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
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10. OFFICERS AND DIRECTORS		DO NOT WRITE IN THIS SPACE
TITLE	PSTD	
NAME	CHILDS, ALLEN D	
STREET ADDRESS	100 SUNSET POINT	
CITY-ST-ZIP	PALATKA, FL 32177	
TITLE		
NAME		
STREET ADDRESS		DO NOT WRITE IN THIS SPACE
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CITY-ST-ZIP		

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02/19/08-80067-007 150.00

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Allen D. Childs 2/8/08 386.329.2669
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR ALLEN D. CHILDS, PRESIDENT Date 2/8/08 Daytime Phone # 386.329.2669