2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000047549

Entity Name: SC BURGESS, INC.

FILED Jan 15, 2007 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
Current Frincipal Flace Of Business.	New Fillicipal Flace Of Dusiliess.

C/O FOWLER WHITE BOGGS BANKER PA 50 NORTH LAURA STREET SUITE 2200 JACKSONVILLE, FL 32202

Current Mailing Address: New Mailing Address:

PO BOX 4483 4815 MAID MARION LANE JACKSONVILLE, FL 32201 JACKSONVILLE, FL 32210

FEI Number: 20-2597200 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

FOWLER WHITE BOGGS BANKER PA ATTN: MICHAEL E GOODBREAD JR 50 NORTH LAURA STREET SUITE 2200 JACKSONVILLE, FL 32202 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:

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete Title: (X) Change () Addition BURGESS, SHERMAN C BURGESS, SHERMON C Name: Name: 1 INDEPENDENT DR, STE 2801 Address: 1 INDEPENDENT DR, STE 2801 Address: City-St-Zip: JACKSONVILLE, FL 32202 City-St-Zip: JACKSONVILLE, FL 32202

Title: SD () Delete Title: () Change () Addition

 Name:
 BURGESS, MARGARET L
 Name:

 Address:
 1 INDEPENDENT DR, STE 2801
 Address:

 City-St-Zip:
 JACKSONVILLE, FL 32202
 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 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: SHERMON C. BURGESS PD 01/15/2007