2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000163431

City-St-Zip: LAKELAND, FL 33810

FILED Mar 23, 2009 Secretary of State

Entity Nar	ne: JUDY SCO	TT ENTERPRISES, INC.		
Current Principal Place of Business:			New Principal Place of Business:	
	OMFIELD BLVD. O, FL 33810			
Current Mailing Address:			New Mailing Address:	
	OMFIELD BLVD. O, FL 33810			
FEI Number:	20-3962120	FEI Number Applied For()	FEI Number Not Applicable () Certificate of Status Desired ()	
Name and	Address of Cu	rrent Registered Agent:	Name and Address of New Registered Agent:	
SCOTT, JUDY 5452 BLOOMFIELD BLVD. LAKELAND, FL 33810 US			SCOTT, JUDY M PRES 5452 BLOOMFIELD BLVD. LAKELAND, FL 33810 US	
	named entity su e of Florida.	bmits this statement for the	purpose of changing its registered office or registered agent, or both	
SIGNATUR	RE: JUDY M. S	COTT	03/23/2009	
Election Car		Signature of Registered Ag rust Fund Contribution ().	ent Date	
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGES TO OFFICERS AND DIRECTO	
Title:	P/D () D	elete	Title: P/D (X) Change () Addition	
Name:	SCOTT, JUDY		Name: SCOTT, JUDY M PRES	
Address:	5452 BLOOMFIEL		Address: 5452 BLOOMFIELD BLVD.	
City-St-Zip:	LAKELAND, FL 3	3810	City-St-Zip: LAKELAND, FL 33810	
Title:	VP/D ()D	elete	Title: () Change () Addition	
Name:	SCOTT, RICHARD		Name:	
Address:	5452 BLOOMFIEL		Address:	
City-St-Zip:	LAKELAND, FL 3	3810	City-St-Zip:	
Title:	T ()D	elete	Title: () Change () Addition	
Name:	SCOTT, JUDY		Name:	
Address:	5452 BLOOMFIEL	.D BLVD.	Address:	
City-St-Zip:	LAKELAND, FL 3		City-St-Zip:	
Title:	S ()D	elete	Title: () Change () Addition	
Name:	SCOTT, RICHARD		Name:	
Address:	5452 BI OOMEIEI	D BLVD	Address:	

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

City-St-Zip:

SIGNATURE: JUDY M. SCOTT **PRES** 03/23/2009