2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000164097

Entity Name: SCOVIL MARKETING INC

FILED May 01, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

10049 ORCHID RIDGE LANE 11121 CAMDEN PARK DR BONITA SPRINGS, FL 34135 WINDERMERE, FL 34786

Current Mailing Address: New Mailing Address:

10049 ORCHID RIDGE LANE 11121 CAMDEN PARK DR WINDERMERE, FL 34786 BONITA SPRINGS, FL 34135

FEI Number: 20-3988123 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

SCOVIL, SCOTT H SCOVIL, SCOTT H 10049 ORCHID RIDGE LANE 11121 CAMDEN PARK DR BONITA SPRINGS, FL 34135 US US WINDERMERE, FL 34786

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: SCOTT SCOVIL 05/01/2007

> Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS: ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete Title: (X) Change () Addition

SCOVIL, SCOTT H SCOVIL, SCOTT H Name: Name: 10049 ORCHID RIDGE LANE 11121 CAMDEN PARK DR Address: Address: City-St-Zip: BONITA SPRINGS, FL 34135 City-St-Zip: WINDERMERE, FL 34786

Title: VΡ Title: VΡ () Delete (X) Change () Addition

Name: SCOVIL, LIA Name: SCOVIL, LIA

10049 ORCHID RIDGE LANE Address: 11121 CAMDEN PARK DR Address: BONITA SPRINGS, FL 34135 WINDERMERE, FL 34786 City-St-Zip: 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

Ρ SIGNATURE: SCOTT SCOVIL 05/01/2007