2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000031040

Entity Name: SCC LANDSCAPING, INC.

FILED Jul 20, 2007 Secretary of State

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

1255 MASON AVENUE 35 KATHY DR

DAYTONA BEACH, FL 32117 ORMOND BEACH, FL 32176

Current Mailing Address: New Mailing Address:

1255 MASON AVENUE 35 KATHY DR.

OMOND BEACH,, FL 32176 DAYTONA BEACH, FL 32117

FEI Number: 20-4505546 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:

SPIEGEL & UTRERA, P.A. SPIEGEL & UTRERA, P.A. 1840 SW 22ND ST. 1840 SW 22ND ST. 4TH FLOOR 4TH FLOOR MIAMI, FL 33145 US MIAMI,, FL 33145 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: 07/20/2007

> 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:

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

CAMPBELL, SCOTT C CAMPBELL, SCOTT C Name: Name: 1255 MASON AVENUE 35 KATHY DR. Address: Address:

City-St-Zip: DAYTONA BEACH, FL 32117 City-St-Zip: ORMOND BEACH, FL 32176

() Delete Title: DS Title: DS (X) Change () Addition CAMPBELL, JENNIFER L Name: CAMPBELL, JENNIFER L Name:

1255 MASON AVENUE Address: 35 KATHY DR. Address:

ORMOND BEACH, FL 32176 DAYTONA BEACH, FL 32117 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.

SIGNATURE: SCOTT C. CAMPBELL **DPT** 07/20/2007