

2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 30, 2008 8:00 am
Secretary of State

04-30-2008 90159 037 ***150.00

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1. Entity Name
SCFG, INC.



Principal Place of Business
32801 US HWY 19 NORTH
SUITE 100
PALM HARBOR, FL 34684

Mailing Address
32801 US HWY 19 NORTH
SUITE 100
PALM HARBOR, FL 34684

60032238



01142008 Chg-P CR2E034 (12/06)

2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number
20-4534518

Applied For
Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

UCC FILING & SEARCH SERVICES INC.
1574 VILLAGE SQUARE BLVD #100
TALLAHASSEE, FL 32309

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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 ☐

\$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE DCEO ☐ Delete
NAME PLANES, WILLIAM
STREET ADDRESS 32802 US HWY 19 NORTH, SUITE 100
CITY-ST-ZIP ORLANDO, FL 32801

TITLE PD ☐ Delete
NAME PLANES, REGINA M
STREET ADDRESS 32802 US HWY 19 NORTH, SUITE 100
CITY-ST-ZIP ORLANDO, FL 32801

TITLE S ☐ Delete
NAME WHITE, LANGFRED W
STREET ADDRESS 32815 U.S. HWY 19 NO.
CITY-ST-ZIP PALM HARBOR, FL 34684

TITLE VP ☐ Delete
NAME BROWN, SHEAWN K
STREET ADDRESS 32802 US HWY 19 NORTH, SUITE 100
CITY-ST-ZIP ORLANDO, FL 32801

TITLE V ☐ Delete
NAME AIELLO, PAUL
STREET ADDRESS 32801 US HWY 19 NORTH SUITE 100
CITY-ST-ZIP PALM HARBOR, FL 34684

TITLE TD ☐ Delete
NAME PLANES, WILLIAM II
STREET ADDRESS 32801 US HWY 19 NORTH SUITE 100
CITY-ST-ZIP PALM HARBOR, FL 34684

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE DIR, CEO ☒ Change ☐ Addition
NAME WILLIAM PLANES
STREET ADDRESS 32801 US HWY 19 NO.
CITY-ST-ZIP PALM HARBOR, FL 34684

TITLE DIR, PRES ☒ Change ☐ Addition
NAME REGINA PLANES
STREET ADDRESS 32801 US HWY 19 NO.
CITY-ST-ZIP PALM HARBOR, FL 34684

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE VP ☒ Change ☐ Addition
NAME SHEAWN BROWN
STREET ADDRESS 32801 US HWY 19 NO.
CITY-ST-ZIP PALM HARBOR, FL 34684

TITLE SR. VP ☒ Change ☐ Addition
NAME PAUL AIELLO
STREET ADDRESS 32801 US HWY 19 NO.
CITY-ST-ZIP PALM HARBOR, FL 34684

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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:

William Planes 4/29/2008
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #