

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P10000028877

**FILED**  
**Feb 18, 2011**  
**Secretary of State**

**Entity Name:** STATE COLLEGE RESTORATION, INC.

**Current Principal Place of Business:**

6001 HIATUS RD STE 13  
TAMARAC, FL 33321

**New Principal Place of Business:**

**Current Mailing Address:**

6001 HIATUS RD STE 13  
TAMARAC, FL 33321

**New Mailing Address:**

**FEI Number:**

**FEI Number Applied For (X)**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

NAPLES-LAWDOCK  
1395 PANTHER LANE STE 300  
NAPLES, FL 34109 US

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

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

**OFFICERS AND DIRECTORS:**

Title: D  
Name: O'DWYER, RORY  
Address: 6001 HIATUS RD STE 13  
City-St-Zip: TAMARAC, FL 33321

Title: C  
Name: MCKINNON, DAVID  
Address: 322 TOLLGATE SHORES DR  
City-St-Zip: ISLAMORADE, FL 33036

Title: P  
Name: REID, LAUREN J  
Address: 6001 HIATUS RD STE 13  
City-St-Zip: TAMARAC, FL 33321

Title: T  
Name: PAZ, VERONICA  
Address: 6001 HIATUS RD STE 13  
City-St-Zip: TAMARAC, FL 33321

I hereby 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 all other like empowered.

**SIGNATURE:** VERONICA PAZ

TREA

02/18/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date