

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000044713

Entity Name: SCJ VENTURES, INC.

FILED  
Jan 23, 2006  
Secretary of State

## Current Principal Place of Business:

905 TARAY DE AVILLA  
TAMPA, FL 33613

## New Principal Place of Business:

## Current Mailing Address:

905 TARAY DE AVILLA  
TAMPA, FL 33613

## New Mailing Address:

905 TARAY DE AVILA  
TAMPA, FL 33613

FEI Number: 59-3450011

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

SHERIDAN, MARYBETH  
905 TARAY DE AVILLA  
TAMPA, FL 33613 US

## Name and Address of New Registered Agent:

SHERIDAN, MARYBETH  
16613 MILLAN DE AVILA  
TAMPA, FL 33613 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: MARYBETH SHERIDAN

01/23/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: SHERIDAN, MARYBETH  
Address: 905 TARAY DE AVILLA  
City-St-Zip: TAMPA, FL 33613

Title: V ( ) Delete  
Name: SHERIDAN, JIM S SR  
Address: 905 TARAY DE AVILLA  
City-St-Zip: TAMPA, FL 33613

Title: S ( ) Delete  
Name: SHERIDAN, MARYBETH E  
Address: 905 TARAY DE AVILA  
City-St-Zip: TAMPA, FL 33613

Title: T ( ) Delete  
Name: SHERIDAN, JAMES S SR  
Address: 905 TARAY DE AVIAL  
City-St-Zip: TAMPA, FL 33613

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: MARYBETH SHERIDAN

P

01/23/2006

Electronic Signature of Signing Officer or Director

Date