

FILE NOW: FILING FEE AFTER MAY 1 IS \$155.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra E. Northam
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **760036** (4)

1. Corporation Name

GEORGE SNOW SCHOLARSHIP FUND, INC.

Principal Place of Business

Mailing Address

2260 N. DIXIE HWY
BOCA RATON FL 33431-6003
US

2260 N. DIXIE HWY
BOCA RATON FL 33431-6003
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified **09/15/1981** 3a. Date of Last Report **02/17/1994**

4. FBI Number **59-2162597** Applied For Not Applicable

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

6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees

7. Nonprofit with IRS 501(c)(3) Tax Exempt Status \$68.75 Supplemental Fee Not Required

8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes Yes No

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

SNOW, TIMOTHY G
2260 N. DIXIE HWY
BOCA RATON FL 33431

81 Name

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

83

84 City

FL

85

Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	STD
NAME	JONES, REXANN
STREET ADDRESS	2260 N. DIXIE HWY
CITY-ST-ZIP	BOCA RATON, FL 00000
TITLE	VPD
NAME	HOWELL, ROBERT S
STREET ADDRESS	899 S W 16TH ST
CITY-ST-ZIP	BOCA RATON, FL 00000
TITLE	P
NAME	SNOW, TIMOTHY G
STREET ADDRESS	2260 N DIXIE HWY
CITY-ST-ZIP	BOCA RATON, FL 00000
TITLE	VPD
NAME	STRAWN, JOEL T
STREET ADDRESS	29 N E FOURTH AVE
CITY-ST-ZIP	DELRAY BCH, FL 00000
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	D <input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	D <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	54 N.E. 4th Ave
4.4 CITY-ST-ZIP	Delray Beach, FL 33483
5.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
5.2 NAME	GREGORY J. CRYAN
5.3 STREET ADDRESS	7000 W. Palmetto Park Road
5.4 CITY-ST-ZIP	Boca Raton, FL 33433
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

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3-15-95 *MS*

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 017, Florida Statutes; and that my name appears in Block 12 or Block 13 if checked, or on an attachment with an address.

SIGNATURE:

Timothy G. Snow
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Timothy G. Snow

3/21/95 (407) 395-1183
Date Daytime Phone #