

FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT 1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 760036 (4)
1. Corporation Name

GEORGE SNOW SCHOLARSHIP FUND, INC.



Principal Place of Business: 2260 N. DIXIE HWY BOCA RATON FL 33431-8003 US
Mailing Address: 2260 N. DIXIE HWY BOCA RATON FL 33431-8003 US

3. Date Incorporated or Qualified: 09/15/1981
3a. Date of Last Report: 03/15/1995

2. Principal Place of Business: 21 520 Forsyth Street
2a. Mailing Address: 26 520 Forsyth Street

4. FEI Number: 59-2162597
Applied For: Not Applicable

22 Suite, Apt. #, etc.
27 City & State

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

23 Boca Raton FL
28 Boca Raton FL

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

24 33487 25 PB 29 33487 30 PB

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

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: - Same -
82 Street Address (P.O. Box Number is Not Acceptable): 520 Forsyth Street
83
84 City: Boca Raton FL 85 Zip Code: 33487

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, 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 617.0503, 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

TITLE	STD	<input type="checkbox"/> DELETE
NAME	JONES, REXANN	
STREET ADDRESS	2260 N. DIXIE HWY	
CITY-ST-ZIP	BOCA RATON, FL 00000	
TITLE	D	<input type="checkbox"/> DELETE
NAME	HOWELL, ROBERT S	
STREET ADDRESS	899 S W 16TH ST	
CITY-ST-ZIP	BOCA RATON, FL 00000	
TITLE	P	<input type="checkbox"/> DELETE
NAME	SNOW, TIMOTHY G	
STREET ADDRESS	2260 N. DIXIE HWY	
CITY-ST-ZIP	BOCA RATONCH FL	
TITLE	D	<input type="checkbox"/> DELETE
NAME	STRAWN, JOEL T	
STREET ADDRESS	54 N.E. 4TH AVE.	
CITY-ST-ZIP	DELRAY BCH, FL 33483	
TITLE	VPD	<input type="checkbox"/> DELETE
NAME	CRYAN, GREGORY J	
STREET ADDRESS	7000 W. PALMETTO PARK ROAD	
CITY-ST-ZIP	BOCA RATON FL 33433	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

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	<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	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Timothy G. Snow

Date: 4/16/96
Oystine Phone #: (407) 994-1021

CR2E037 (12/95)