2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000002955

Entity Name: CLASSICAL LEAGUE SCHOLARSHIPS, INC.

FILED Sep 03, 2008 Secretary of State

2400 SHALLEY DRIVE 3279 JOHN HANCOCK DR TALLAHASSEE, FL 32308 TALLAHASSEE, FL 32312

Current Mailing Address: New Mailing Address:

3279 JOHN HANCOCK DRIVE 3279 JOHN HANCOCK DR TALLAHASSEE, FL 32312 TALLAHASSEE, FL 32312

FEI Number: 59-3645238 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

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

ANDINO, THERESA 3279 JOHN HANCOCK DRIVE TALLAHASSEE, FL 32312 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:

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Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

 Title:
 PD () Delete
 Title:
 PD (X) Change () Addition

 Name:
 BOWER, LOIS ANN
 Name:
 MORGAN, JASON

 Address:
 2400 SHALLEY DRIVE
 Address:
 4510 RIVERDALE RD

 City-St-Zip:
 TALLAHASSEE, FL 32308
 City-St-Zip:
 RIVERDALE, MD 20737

Title: VD () Delete Title: VD (X) Change () Addition Name: ALLEN, NANCY Name: ANDINO, KENNETH

 Name:
 ALLEN, NANCY
 Name:
 ANDINO, KENNETH

 Address:
 719 MORAVAN AVE.
 Address:
 3279 JOHN HANCOCK DR

 City-St-Zip:
 JACKSONVILLE, FL 32211
 City-St-Zip:
 TALLAHASSEE, FL 32312

Title: STD () Delete Title: () Change () Addition

 Name:
 ANDINO, THERESA
 Name:

 Address:
 3279 JOHN HANCOCK
 Address:

 City-St-Zip:
 TALLAHASSEE, FL 32312
 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: THERESA ANDINO STD 09/03/2008