

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000007137

FILED  
Apr 15, 2008  
Secretary of State

**Entity Name:** THE BOB SHARPE SCHOLARSHIP FOUNDATION, INC.

**Current Principal Place of Business:**

101 E COLLEGE AVE  
SUITE 302  
TALLAHASSEE, FL 32301

**New Principal Place of Business:**

**Current Mailing Address:**

101 E COLLEGE AVE  
SUITE 302  
TALLAHASSEE, FL 32301

**New Mailing Address:**

**FEI Number:** 20-1378425      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

OVERTON, LARRY J  
101 E COLLEGE AVE  
SUITE 302  
TALLAHASSEE, FL 32301 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: C      ( ) Delete  
Name: SHARPE, BOB  
Address: 316 E PARK AVE  
City-St-Zip: TALLAHASSEE, FL 32301

Title: VC      ( ) Delete  
Name: OVERTON, LARRY J  
Address: 101 E COLLEGE AVE STE 302  
City-St-Zip: TALLAHASSEE, FL 32301

Title: VC      ( ) Delete  
Name: BLANK N, PHILY  
Address: 204-B SOUTH MONROE STREET  
City-St-Zip: TALLAHASSEE, FL 32301

**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:

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: LARRY J. OVERTON

VC

04/15/2008

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date