

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000011908

FILED  
May 08, 2008  
Secretary of State

Entity Name: SUSAN ZYSEK SCHOLARSHIP FUND, INC.

**Current Principal Place of Business:**

961 NE 4TH STREET  
OCALA, FL 34470

**New Principal Place of Business:**

**Current Mailing Address:**

961 NE 4TH STREET  
OCALA, FL 34470

**New Mailing Address:**

FEI Number: 20-8020960      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:**

ZYSEK, JEFFREY  
961 NE 4TH STREET  
OCALA, FL 34470    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: PD ( ) Delete  
Name: ZYSEK, JEFFREY A  
Address: 961 NE 4TH STREET  
City-St-Zip: Ocala, FL 34470

Title: VD ( ) Delete  
Name: STRZYZYNSKI, DAVID T  
Address: 106 COLLEGE CROSSING  
City-St-Zip: ROLLING MEADOWS, IL 60008

Title: SD ( ) Delete  
Name: HEITMULLER, KIMBERLY  
Address: 4047 S.E. 3RD STREET  
City-St-Zip: Ocala, FL 34471

Title: TD ( ) Delete  
Name: ZYSEK, MICHAEL S  
Address: 3036 N. CAVES VALLEY  
City-St-Zip: LECANTO, FL 34461

**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 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: JEFFREY ZYSEK

PD

05/08/2008

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date