

# **2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N08000007123

**FILED**  
**Apr 20, 2010**  
**Secretary of State**

**Entity Name:** THE SALVATORE BELLASSAI, JR. SCHOLARSHIP FUND, INC.

**Current Principal Place of Business:**

4033 NE 9TH AVENUE  
FORT LAUDERDALE, FL 33334

**New Principal Place of Business:**

**Current Mailing Address:**

4033 NE 9TH AVENUE  
FORT LAUDERDALE, FL 33334

**New Mailing Address:**

**FEI Number:** 26-3238296

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

MAFFEI, GEORGE P ESQ.  
633 SE 3RD AVENUE  
SUITE 4R  
FORT LAUDERDALE, FL 33301 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: D  
Name: BELLASSAI, SALVATORE SR.  
Address: 4033 NE 9TH AVENUE  
City-St-Zip: FORT LAUDERDALE, FL 33334

Title: VSD  
Name: BELLASSAI, SHEILA  
Address: 4033 NE 9TH AVENUE  
City-St-Zip: FORT LAUDERDALE, FL 33334

Title: PT  
Name: BELLASSAI, SAL  
Address: 4033 NE 9TH AVENUE  
City-St-Zip: FORT LAUDERDALE, FL 33334

I hereby 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 all other like empowered.

SIGNATURE: BELLASSAI, SALATORE SR.

D

04/20/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date