



2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Aug 13, 2004 8:00 am
Secretary of State

08-13-2004 90070 046 ****61.25

DOCUMENT # N27855					
1. Entity Name DARCY AKERS ORMOND BEACH ROTARY SCHOLARSHIP FUND, INC.					
Principal Place of Business 120 E. GRANADA BLVD. C/O WILLIAM AKERS, III ORMOND BEACH, FL 32176		Mailing Address 120 E. GRANADA BLVD. C/O WILLIAM AKERS, III ORMOND BEACH, FL 32176			
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	4. FEI Number 59-2957668	
				Applied For <input type="checkbox"/> Not Applicable	
				5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent			7. Name and Address of New Registered Agent		
AKERS, WILLIAM III 120 E. GRANADA BLVD. ORMOND BEACH, FL 32176			Name _____ Street Address (P.O. Box Number is Not Acceptable) _____ City _____ FL Zip Code _____		
8. 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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE _____ Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE: _____					
Filing Fee is \$61.25 Due by September 8, 2004		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$5.00 May Be Added to Fees	
				Make check payable to Florida Department of State	
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE	D	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME	CARTLEDGE, THOMAS H.		NAME		
STREET ADDRESS	417 N. BEACH ST.		STREET ADDRESS		
CITY-ST-ZIP	ORMOND BEACH, FL 32174		CITY-ST-ZIP		
TITLE	D	<input checked="" type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change	<input checked="" type="checkbox"/> Addition
NAME	MCLEOD, ROBERT L.		NAME	D GILKEY, KENNETH G.	
STREET ADDRESS	161 ELLICOTT DRIVE		STREET ADDRESS	170 JOHN ANDERSON DRIVE	
CITY-ST-ZIP	ORMOND BEACH, FL 32174		CITY-ST-ZIP	ORMOND BEACH, FL 32176	
TITLE	D	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME	MAYO, HOWARD A. JR.		NAME		
STREET ADDRESS	110 COUNTRY CLUB DR		STREET ADDRESS		
CITY-ST-ZIP	ORMOND BEACH, FL 32174		CITY-ST-ZIP		
TITLE	D	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME	AKERS, WILLIAM III		NAME		
STREET ADDRESS	120 E. GRANADA BLVD.		STREET ADDRESS		
CITY-ST-ZIP	ORMOND BEACH, FL 32176		CITY-ST-ZIP		
TITLE	D	<input type="checkbox"/> Delete	TITLE	<input checked="" type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME	CRANVILLE, GERALD C		NAME	D GRANVILLE, GERALD C	
STREET ADDRESS	575 NORTH NOVA RD.		STREET ADDRESS	575 NORTH NOVA RD	
CITY-ST-ZIP	ORMOND BEACH, FL 32176		CITY-ST-ZIP	ORMOND BEACH FL 32174	
TITLE		<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: 		KENNETH G. GILKEY		8/9/2004 (386) 672-8272	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR				Date Daytime Phone #	