

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N39688

FILED
Feb 05, 2009
Secretary of State

Entity Name: AMERICAN ASSOCIATION OF STATE TROOPERS SCHOLARSHIP FOUNDATION, INC.

Current Principal Place of Business:

1949 RAYMOND DIEHL ROAD
TALLAHASSEE, FL 32308 US

New Principal Place of Business:

Current Mailing Address:

1949 RAYMOND DIEHL ROAD
TALLAHASSEE, FL 32308 US

New Mailing Address:

FEI Number: 59-3054670 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

COX, J.ALAN
1660 METROPOLITAN CIRCLE
TALLAHASSEE, FL 32308 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: CHM () Delete
Name: RICKS, CHRISTIAN
Address: 328 OLD GIBLER ROAD
City-St-Zip: JEFFERSON CITY, MO 65109

Title: S/T () Delete
Name: JOHNSON, JAMES D
Address: 2950 SPRING CHASE LANE
City-St-Zip: MARIANNA, FL 32446

Title: BM () Delete
Name: YOAKUM, ROBERT
Address: 1194 HIGHWAY 54 EAST
City-St-Zip: COVINGTON, TN 38019

Title: BM () Delete
Name: FORTUNAS, PAULA S
Address: 6264 MAHAN DRIVE
City-St-Zip: TALLAHASSEE, FL 32308

Title: ED () Delete
Name: HOWES, KENNETH C
Address: 3065 OBRIEN DRIVE
City-St-Zip: TALLAHASSEE, FL 32309

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:

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: KENNETH HOWES

ED

02/05/2009

Electronic Signature of Signing Officer or Director

_____ Date