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Apr 15 1997 8:00am
Secretary of State

NONPROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N39698 (8)

1. Corporation Name

THE MISS HOMESTEAD SCHOLARSHIP FOUNDATION, INCORPORATED



Principal Place of Business

27235 S.W. 168 AVE
HOMESTEAD FL 33031

Mailing Address

27235 S.W. 168 AVE
HOMESTEAD FL 33031-2752

3. Date Incorporated or Qualified
08/28/1990

3a. Date of Last Report
02/21/1996

2. Principal Place of Business

21 25 S W 3rd Street

2a. Mailing Address

26 25 S W 3rd Street

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

23 Homestead, FL

City & State

28 Homestead, FL

Zip

24 33030

Country

25 USA

Zip

29 33030

Country

30 USA

4. FEI Number
65-0281355

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

HEBERT, FAY
27235 S.W. 168TH AVE.
HOMESTEAD FL 33031

10. Name and Address of New Registered Agent

81 Name Maria Scott
82 Street Address (P.O. Box Number is Not Acceptable)
25 S W 3rd Street
83
84 City Homestead FL 85 Zip Code 33030

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of Section 617.0503, Florida Statutes.

SIGNATURE Maria Scott, Executive Director

4/8/97

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE	PD	☒ DELETE
NAME	FAY, HEBERT	
STREET ADDRESS	27235 S.W. 168 AVE	
CITY-ST-ZIP	HOMESTEAD FL 33031	
TITLE	D	☒ DELETE
NAME	PORTER, LAVOYCE	
STREET ADDRESS	18604 S.W. 294TH TERRACE	
CITY-ST-ZIP	HOMESTEAD FL	
TITLE	V	☐ DELETE
NAME	FERGUSON, CATHY	
STREET ADDRESS	23705 S.W. 153 CT.	
CITY-ST-ZIP	HOMESTEAD FL 33030	
TITLE	T	☒ DELETE
NAME	BATEMAN, DONA	
STREET ADDRESS	2609 S.W. 21 CT.	
CITY-ST-ZIP	HOMESTEAD FL 33035	
TITLE	S	☒ DELETE
NAME	SNYDER, CATHY	
STREET ADDRESS	18475 S.W. 295 TERR	
CITY-ST-ZIP	HOMESTEAD FL 33030	
TITLE	D	☒ DELETE
NAME	COOPER, CAY	
STREET ADDRESS	16200 S.W. 284 ST	
CITY-ST-ZIP	HOMESTEAD FL 33030	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	P	☒ Change ☐ Addition
1.2 NAME	Maria Scott	
1.3 STREET ADDRESS	25 S W 3rd St.	
1.4 CITY-ST-ZIP	Homestead FL. 33030	☒ Change ☐ Addition
2.1 TITLE	T	☒ Change ☐ Addition
2.2 NAME	Fay Hebert	
2.3 STREET ADDRESS	27235 S W 168 Ave	
2.4 CITY-ST-ZIP	Homestead FL. 33031	☒ Change ☐ Addition
3.1 TITLE	S	☒ Change ☐ Addition
3.2 NAME	LaVoyce Porter	
3.3 STREET ADDRESS	18604 S W 294 Terr.	
3.4 CITY-ST-ZIP	Homestead FL. 33030	☒ Change ☐ Addition
4.1 TITLE	D	☒ Change ☐ Addition
4.2 NAME	Dona Bateman	
4.3 STREET ADDRESS	615 S E 29 Drive, East Lake	
4.4 CITY-ST-ZIP	Homestead FL 33033	☒ Change ☐ Addition
5.1 TITLE	D	☒ Change ☐ Addition
5.2 NAME	Ann Marie	
5.3 STREET ADDRESS	1344 N. Krome Ave	
5.4 CITY-ST-ZIP	Homestead FL 33030	☐ Change ☐ Addition
6.1 TITLE		☐ Change ☐ Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY-ST-ZIP		

14. I do 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 annual report or supplemental annual 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 12 or Block 13, changed, or on an attachment with an address.

SIGNATURE Maria Scott, Executive Director

4/8/97

305-248-1304

CR2E037 (9/96)