## FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

**FILED** 

Jan 30 1997 8:00am

Secretary of State

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

## 1997 DOCUMENT #

CITY-ST-ZIP

N95000003542 (6)

BRANDON ROTARY CLUB SCHOLARSHIP FUND, INC.

	01, (101,111, 020, 001,0			
Principal Place	e of Business	Mailing Address		T TO BATHOL BIR TO FEEL BIREL OF SHE WAS IN BUREL BUREL BRIDG BILL BUILD BIREL BUREL BIRE
P.O. BOX 303 BRANDON FL 33511		P.O. BOX 303 BRANDON FL 335094	0303	
_				3. Date Incorporated or Qualified 07/24/1995 3a. Date of Last Report 07/02/1996
<b></b>	lace of Business	2a. Mailing Address	}	4. FET Number Applied For
21		26		59-3329005 Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc	5.	5. Certificate of Status Desired \$8.75 Additional
22		(St. 8 Cluster		Fee Required
City & State	e	City & State		6. Election Campaige Financing \$5.00 May Be Trust Fund Contribution Added to Fees
Zip	Country	7ip	Country	
24	25	29	30	8. This corporation has liability for intangible tax under s. 199.032,     Florida Statutes
24	9. Name and Address of Curre		[30]	10. Name and Address of New Registered Agent
			81 Name	
MODER	AOTT MICHAEL LEGOLIDE		<u> </u>	
MCDERMOTT, MICHAEL J ESQUIRE 791 WEST LUMSDEN ROAD			82 Street Addi	lress (P.O. Box Number is Not Acceptable)
	ON FL 33511		83	
DRANDO	N FL 33311			
			84 City	Fi 85 Zip Code
11 Pursuant	to the provisions of Sections 617.09	02 and 617 1508 Horida !	Statutes, the above-named corr	• • • • • • • • • • • • • • • • • • •
office or r	egistered agent, or both, in the Stat	e of Florida, Such change	was authorized by the corporat	poration submits this statement for the purpose of changing its registered tion's board of directors. I hereby accept the appointment as registered
agent. I a	m familiar with, and accept the obli	gations of, Section 617.050	03. Horida Statutes.	
SIGNATURE .	Signature, typicd or printed harne of registered as	aged and Mand other when	(NOTE Registered Agent signature requir	incowhen reinstating) DAM
12.	<del></del>	ND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	D	DELET	E 11 THLE	Change Addition
NAME	CURRY, DERRELL		1.2 NAM(	
STREET ADDRESS	2505 SR 60 EAST		1.3 STREET ADDRESS	
CITY-ST-ZIP	VALRICO FL 33594		1.4 CITY - S3 - 7IP	
TITLE	D	DELET		Change Addit on
NAME	GLASS, MARSHALL		2.2 NAM!	
STREET ADDRESS	605 HITCHINGPOST DRIVE		2 3 STREET ADDRESS	
CITY-ST-ZIP	BRANDON FL 33511		2. 4 C(1) + ST - 7(P	
TITLE	D	DLLET		Change Addition
NAME	TALLEY, CHARLES D JR.		3.2 NAME	_ · <del>_</del>
STREET ADDRESS	101 HOLLY TREE LANE		3 3 STREET ADDRESS	
CITY-ST-ZIP	BRANDON FL 33511		3.4 CHY-ST-ZIP	
TITLE		DELF1		Change Addition
NAME			4. 2 NAMč	-
STREET ADDRESS			4.3 STREET ADDRESS	
CITY-ST-ZIP			4.4 City - S1-2IP	
TITLE	<del></del>	DELET		Change Addition
NAME			5.2 NAME	· <del>-</del>
STREET ADDRESS			5.3 STREET ADDRESS	
CITY-ST-ZIP			5.4.C-1Y-S1-ZIP	
TITLE	· · · · · · · · · · · · · · · · · · ·	DELET		Change Addition
NAME			6.2 NAME	
STREET ADDRESS			6.3 STREET ADDRESS	

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 frustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 13 if changed, or on an attachment with an address.