## 2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

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**SIGNATURE** 

## Mar 26, 2004 8:00 am DOCUMENT # N95000003542 **Secretary of State** 1. Entity Name 03-26-2004 90041 036 \*\*\*\*61.25 BRANDON ROTARY CLUB SCHOLARSHIP FUND, INC. Principal Place of Business Mailing Address P.O. BOX 303 P.O. BOX 303 94037415 BRANDON FL 33511 BRANDON FL 335 33509 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. MOORE CR2E037 (11/03) City & State Applied For City & State 4. FEI Number 59-3329005 Not Applicable 3350 g Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name MCDERMOTT, MICHAEL J ESQUIRE Street Address (P.O. Box Number is Not Acceptable) 791 WEST LUMSDEN ROAD **BRANDON FL 33511** City 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 FILE NOW: FEE IS \$61.25 9. Election Campaign Financing Make Check Payable to \$5.00 May Be Trust Fund Contribution. Due By May 1, 2004 Added to Fees Florida Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. 11. PΠ TITLE ☐ Delete Change Addition GLASS, MARSHALL NAME NAME 605 HITCHING POST DR. STREET ADDRESS STREET ADDRESS BRANDON FL 33511 CITY-ST-ZIP CITY-ST-ZIP TD TITLE ☐ Delete TITLE ☐ Change ☐ Addition CURRY, DERRELL NAME NAME 4611 S. JOHN MOORE ROAD STREET ADDRESS STREET ADDRESS BRANDON FL 33511 CITY-ST-ZIP CITY-ST-ZIP ☐ Delete Change Addition TITLE THURMAN, CHARLES NAME NAME 804 HICKORY FORTY DR. STREET ADDRESS STREET ADDRESS SEFFNER FL 33584 CITY-ST-ZIP CITY-ST-7IP TITLE ☐ Delete TITLE ☐ Change ☐ Addition FERRARO, VINCENT NAME 217 LITHIA PINECREST RD. STREET ADDRESS STREET ADDRESS BRANDON FL 33511 CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition CONA, CHRIS NAME NAME 1911 US HWY 301 N. STREET ADDRESS STREET ADDRESS **TAMPA FL 33619** CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ 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 supplied ental 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 repeiver 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

FILED

913-681-4676