2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 12, 2007
Secretary of State

DOCUMENT# N03000008541

Entity Name: BABY OTTER SCHOLARSHIP AND EDUCATION FUND, INC.

Current Principal Place of Business:

6511 NOVA DRIVE
#159
DAVIE, FL 33317 US

New Principal Place of Business:

Current Mailing Address:

6511 NOVA DRIVE
#159
DAVIE, FL 33317 US

New Mailing Address:

FEI Number: 42-1610189 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

MARLENE, BLOOM
6511 NOVA DRIVE
#159
DAVIE, FL 33317 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:	PTD	( ) Delete
Name:	BLOOM, MARLENE	
Address:	6511 NOVA DRIVE, #159	
City-St-Zip:	DAVIE, FL 33317 US	
Title:	D	( ) Delete
Name:	RONALD, EPSTEIN	
Address:	2501 MARINA BAY DRIVE WEST, #105	
City-St-Zip:	FORT LAUDERDALE, FL 33312	
Title:	D	( ) Delete
Name:	DAWSON, ANDRE' D	
Address:	10601 S.W. 74 AVENUE	
City-St-Zip:	MIAMI, FL 33156 US	
Title:	D	( ) Delete
Name:	CLARK, RICHARD D	
Address:	40 SAW MILL RIVER ROAD	
City-St-Zip:	HAWTHORNE, NY 10532 US	

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:	D	(X) Change ( ) Addition
Name:	BURGESS, KIM	
Address:	9800 NW 11 STREET	
City-St-Zip:	PLANTATION, FL 33322	

I hereby certify that the information supplied with this filing does not qualify for the 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: MARLENE BLOOM PD 04/12/2007

Electronic Signature of Signing Officer or Director — Date