

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000001388

FILED
Mar 16, 2008
Secretary of State

Entity Name: KRISIA AND STEVE RHODEN MEMORIAL SCHOLARSHIP FOUNDATION INC.

Current Principal Place of Business:

C/O PIN OAK MANAGEMENT INC.
4851 NW 103RD AVE, SUITE 54
SUNRISE, FL 33351 US

New Principal Place of Business:

14422 SW 147TH. COURT
MIAMI, FL 33196 US

Current Mailing Address:

PO BOX 551057
FT. LAUDERDALE, FL 333551057

New Mailing Address:

14422 SW 147TH. COURT
MIAMI, FL 33196 US

FEI Number: 65-0524608

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RHODEN, JOSEPH
11206 NW 36 AVE
MIAMI, FL 33167 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: PD () Delete
Name: RHODEN, JOSEPH A
Address: 14422 SW 147TH CT.
City-St-Zip: MIAMI, FL 33196

Title: VD () Delete
Name: RHODEN, MICHELLE H
Address: 14422 SW 147TH CT.
City-St-Zip: MIAMI, FL 33196

Title: DT () Delete
Name: HAMILTON, JERRY
Address: 901 NE 209TH TERRACE, #101
City-St-Zip: MIAMI, FL 33179

Title: D () Delete
Name: JONES, DARYL L SENATOR
Address: 15820 SW 98 CT
City-St-Zip: MIAMI, FL 33157

Title: D () Delete
Name: LAROE, MICHELLE DR.
Address: 9327 MOSS TR
City-St-Zip: DALLAS, TX 75231

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: DT (X) Change () Addition
Name: HAMILTON, JERRY
Address: 3342 LAUREL OAK STREET
City-St-Zip: HOLLYWOOD, FL 33312

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change () Addition
Name: LAROE, MICHELLE DR.
Address: 922 HOMESTEAD RIDGE
City-St-Zip: NEW BRAUNFELS, TX 78132

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: JOSEPH RHODEN

PD

03/16/2008

Electronic Signature of Signing Officer or Director

Date