

**2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 704886

**Entity Name:** PILOT SCHOLARSHIP HOUSE FOUNDATION, FLORIDA DISTRICT, INC.

**FILED**  
**Apr 04, 2013**  
**Secretary of State**  
**CC1823424321**

**Current Principal Place of Business:**

%SOUTHERN SCHOLARSHIP FOUNDATION  
322 STADIUM DR.  
TALLAHASSEE, FL 32304

**Current Mailing Address:**

3633 MT. PLEASANT ROAD  
QUINCY, FL 32352 US

**FEI Number: 59-6147872**

**Certificate of Status Desired: No**

**Name and Address of Current Registered Agent:**

FALLIS, CAROLINE P  
3633 MT. PLEASANT ROAD  
QUINCY, FL 32352 US

*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

**Officer/Director Detail :**

Title D  
Name SPANGLER, JOAN  
Address 1240 MURIFIELD COURT  
City-State-Zip: TITUSVILLE FL 32780

Title D  
Name HESSLER, LINDA  
Address 1245 SHADOW LANE  
City-State-Zip: FT MYERS FL 33901

Title P  
Name DUBOVSKY, BETTY  
Address 6533 TODD ROAD  
City-State-Zip: JACKSONVILLE FL 32216

Title T  
Name FALLIS, CAROLINE  
Address 3633 MT PLEASANT ROAD  
City-State-Zip: QUINCY FL 32352

Title PE  
Name EDENFIELD, CHARLOTTE  
Address 3181 CHAIRES CROSS ROAD  
City-State-Zip: TALLAHASSEE FL 32317

Title D  
Name MIDGETT, JOAN  
Address 8906 CITRUS VILLAGE DR.  
APT # 102  
City-State-Zip: TAMPA FL 33626

*I hereby 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 all other like empowered.*

**SIGNATURE: CAROLINE P. FALLIS**

**TREASURER**

**04/04/2013**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date