

**2022 FLORIDA NOT FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

DOCUMENT# N17000006094

**Entity Name:** MATTHEW SALENIEKS MEMORIAL SCHOLARSHIP FUND CORPORATION

**FILED**  
**Oct 28, 2022**  
**Secretary of State**  
**9245151096CC**

**Current Principal Place of Business:**

1600 S OCEAN BLVD  
803  
POMPANO BEACH, FL 33062

**Current Mailing Address:**

1600 S OCEAN BLVD  
803  
POMPANO BEACH, FL 33062 US

**FEI Number: 82-1797454**

**Certificate of Status Desired: No**

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

SALENIEKS, PAUL  
1551 ISLAND WAY  
WESTON, FL 33326 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            DIR  
Name            SALENIEKS, PAUL  
Address        1600 S OCEAN BLVD  
                  803  
City-State-Zip: POMPANO BEACH FL 33062

Title            DIR  
Name            LASHER, NATASHA  
Address        1060 SW 50TH AVE  
City-State-Zip: PLANTATION FL 33317

Title            DIR  
Name            FENSTER, JAMIE  
Address        2981 WENTWORTH  
City-State-Zip: WESTON FL 33332

Title            DIRECTOR  
Name            FENSTER, EMILEE SARAH  
Address        2981 WENTWORTH  
City-State-Zip: WESTON FL 33332

*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: NATASHA LASHER**

**DIRECTOR**

**10/28/2022**

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

\_\_\_\_\_  
Date