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.

SECRETARY

SIGNATURE: KATIE FORT

Electronic Signature of Signing Officer/Director Detail

Electronic Signature of 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.

Officer/Director Detail :

| | Title | DP | Title | DS |
|--|-----------------|----------------------|-----------------|--------------------|
| | Name | SCHISLER, KYLE | Name | FORT, KATIE |
| | Address | 327 GRAND OAKS DRIVE | Address | 5515 RAINBOW LANE |
| | City-State-Zip: | NICEVILLE FL 32578 | City-State-Zip: | CRESTVIEW FL 32539 |
| | | | | |
| | | | | |
| | Title | DT | | |
| | Title Name | DT HEARNDON, TJ | | |
| | | | | |
| | Name | HEARNDON, TJ | | |

2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N2100002001

Entity Name: MICHAEL S. SCHISLER SCHOLARSHIP, INC.

Current Principal Place of Business:

327 GRAND OAKS DRIVE NICEVILLE. FL 32578

Current Mailing Address:

327 GRAND OAKS DRIVE NICEVILLE, FL 32578

FEI Number: 86-2299914

Name and Address of Current Registered Agent:

SCHISLER, KYLE 327 GRAND OAKS DRIVE NICEVILLE, FL 32578 US

SIGNATURE:

FILED Jan 13, 2023 Secretary of State 0829807579CC

Certificate of Status Desired: No

01/13/2023

Date

Date