

**2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N22000009309

**FILED**  
**Jan 30, 2024**  
**Secretary of State**  
**8223330157CC**

**Entity Name:** THE BROTHER MARTIN SCHOLARSHIP FUND INC.

**Current Principal Place of Business:**

453 TREVISO DRIVE  
KISSIMMEE, FL 34759

**Current Mailing Address:**

453 TREVISO DRIVE  
KISSIMMEE, FL 34759 US

**FEI Number: NOT APPLICABLE**

**Certificate of Status Desired: No**

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

VCORP SERVICES, LLC  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 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 P  
Name DALTON, B J  
Address 453 TREVISO DRIVE  
City-State-Zip: KISSIMMEE FL 34759

Title S  
Name DALTON, JENNIFER  
Address 453 TREVISO DRIVE  
City-State-Zip: KISSIMMEE FL 34759

Title T  
Name MINOR, JAY  
Address 453 TREVISO DRIVE  
City-State-Zip: KISSIMMEE FL 34759

Title D  
Name MINOR, JAY  
Address 453 TREVISO DRIVE  
City-State-Zip: KISSIMMEE FL 34759

Title D  
Name DALTON, JENNIFER  
Address 453 TREVISO DRIVE  
City-State-Zip: KISSIMMEE FL 34759

Title D  
Name DALTON, B J  
Address 453 TREVISO DRIVE  
City-State-Zip: KISSIMMEE FL 34759

*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: DALTON , B J**

**PRESIDENT**

**01/30/2024**

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

\_\_\_\_\_  
Date