

2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N93000005268

Entity Name: SECURITY SCHOLARSHIP SOCIETY, INC.

Current Principal Place of Business:

433 ASCENSION WAY,
SUITE 600
SALT LAKE CITY, UT 84123

Current Mailing Address:

P. O. BOX 57220
SALT LAKE CITY, UT 84157-0220

FEI Number: 59-3220126

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SILL, GARRETT S
433 ASCENSION WAY,
SUITE 600
SALT LAKE CITY, FL 84123 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: GARRETT S. SILL

03/06/2024

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title D, PRESIDENT
Name QUIST, SCOTT M
Address P. O. BOX 57220
City-State-Zip: SALT LAKE CITY UT 84157-0220

Title TREASURER
Name SILL, GARRETT S
Address P. O. BOX 57220
City-State-Zip: SALT LAKE CITY UT 84157-0220

Title VP/CONTROLLER
Name OLSON, DIANA C
Address P. O. BOX 57220
City-State-Zip: SALT LAKE CITY UT 84157-0220

Title DIRECTOR
Name COOK, JOHN L
Address P. O. BOX 57220
City-State-Zip: SALT LAKE CITY UT 84157-0220

Title DIRECTOR
Name HUNTER, ROBERT G
Address P. O. BOX 57220
City-State-Zip: SALT LAKE CITY UT 84157-0220

Title DIRECTOR
Name MOODY, HOWARD CRAIG
Address P. O. BOX 57220
City-State-Zip: SALT LAKE CITY UT 84157-0220

Title DIRECTOR
Name FULLER, GILBERT A
Address P. O. BOX 57220
City-State-Zip: SALT LAKE CITY UT 84157-0220

Title DIRECTOR, VP
Name OVERBAUGH, JASON G
Address P. O. BOX 57220
City-State-Zip: SALT LAKE CITY UT 84157-0220

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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: DIANA C OLSON

VICE
PRESIDENT/CONTROLL
R

03/06/2024

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR, VP
Name QUIST, SCOTT ANDREW
Address P. O. BOX 57220
City-State-Zip: SALT LAKE CITY UT 84157-0220

Title VP, ASST. SECRETARY
Name QUIST, ADAM G
Address P. O. BOX 57220
City-State-Zip: SALT LAKE CITY UT 84157-0220