2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 703730

Address:

City-St-Zip:

1625 BEULAH RD

WINTER GARDEN, FL 34787

Apr 22, 2008 Secretary of State

Entity Name: WEST ORANGE SCHOLARSHIP FOUNDATION INC

Current Principal Place of Business: New Principal Place of Business: 800 S. DILLARD ST WINTER GARDEN, FL 347873910 **Current Mailing Address: New Mailing Address:** 800 S. DILLARD ST WINTER GARDEN, FL 347873910 FEI Number: 59-6159394 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: ARMBRUSTER, MIKE SINES, HENRY C/O WEST ORÁNGE HIGH SCHOOL 800 S DILLARD ST WINTER GARDEN, FL 34787 WINTER GARDEN, FL 34787 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: HENRY SINES 04/22/2008 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Change () Addition () Delete SINES, HENRY W Name: Name: 800 S. DILLARD ST. Address: Address: City-St-Zip: WINTER GARDEN, FL 34787 City-St-Zip: Title: PD Title: () Delete () Change () Addition Name: TERRELL, JOHN Name: Address: P.O. BOX 771083 Address: City-St-Zip: WINTER GARDEN, FL 34777 City-St-Zip: Title: VD () Delete Title: () Change () Addition MASHBURN, ERIC, Name: Name: 102 E. MAPLE ST. Address: Address: City-St-Zip: WINTER GARDEN, FL City-St-Zip: Title: SD () Delete Title: TD (X) Change () Addition ARMBRUSTER, MIKE RAYBORN, TERRY Name: Name:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

Address:

City-St-Zip:

1144 WILLOW BAY DR

WINTER GARDEN, FL 34787

SIGNATURE: HENRY W SINES D 04/22/2008