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Apr 30 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT
1998

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **705268** **(1)**

1. Corporation Name
SCHOLARSHIP RECOGNITION, INC.

Principal Place of Business	Mailing Address
426 SCHOOL ST. SEBRING FL 33870	426 SCHOOL ST. SEBRING FL 33870

3. Date Incorporated or Qualified: 03/01/1963

4. FEI Number: 59-2360670 ☐ Applied For ☐ Not Applicable

2. Principal Place of Business — 21
Suite, Apt. #, etc. — 22
City & State — 23
Zip — 24 Country — 26

2a. Mailing Address — 26
Suite, Apt. #, etc. — 27
City & State — 28
Zip — 29 Country — 30

5. Certificate of Status Desired ☒ **$8.75** Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

7. Is this nonprofit corporation a homeowners association? ☐ Yes ☐ No

8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

FARMER RICHARD R
426 SCHOOL STREET
SEBRING FL 33870

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City **FL** 85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	S President	☐ DELETE	1.1 TITLE	Director	☐ Change ☐ Addition
NAME	HURLEY, RICKI		1.2 NAME	Peavy, Richard (Dick)	
STREET ADDRESS	~~8200 US 27 SOUTH~~ P.O. Box 3875 N/A		1.3 STREET ADDRESS	2876 W. Albatross Road	
CITY-ST-ZIP	SEBRING FL		1.4 CITY-ST-ZIP	Avon Park, FL 33825	
TITLE	D	☐ DELETE	2.1 TITLE	Director	☐ Change ☐ Addition
NAME	TAYLOR, PATRICIA		2.2 NAME	Whidden, Jerry	
STREET ADDRESS	1617 NE LAKEVIEW DR		2.3 STREET ADDRESS	231 S. Ridgewood Drive	
CITY-ST-ZIP	SEBRING FL		2.4 CITY-ST-ZIP	Sebring, FL 33870	
TITLE	D	☐ DELETE	3.1 TITLE	Director	☐ Change ☐ Addition
NAME	WELLS, LAWRENCE (LONN		3.2 NAME	Schumacher, Aida	
STREET ADDRESS	~~1200 C.O. ROAD 29~~ P.O. Box 1104 N/A		3.3 STREET ADDRESS	1901 DeSoto Place N/A	
CITY-ST-ZIP	LAKE PLACID FL		3.4 CITY-ST-ZIP	Sebring, FL 33870	
TITLE	S	☐ DELETE	4.1 TITLE	Director	☐ Change ☐ Addition
NAME	SCOBEY, CONNIE E		4.2 NAME	Causey, Jesse	
STREET ADDRESS	426 SCHOOL STREE		4.3 STREET ADDRESS	108 Lake June Rd.	
CITY-ST-ZIP	SEBRING FL		4.4 CITY-ST-ZIP	Lake Placid, FL 33852	
TITLE	D	☐ DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME	WATTERS, JOYCE		5.2 NAME		
STREET ADDRESS	2220 CO RD 17 N N/A		5.3 STREET ADDRESS		
CITY-ST-ZIP	LAKE PLACID FL		5.4 CITY-ST-ZIP		
TITLE	D	☐ DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME	BROOKS, JIM		6.2 NAME	600002508446	
STREET ADDRESS	1850 US 27 SOUTH N/A		6.3 STREET ADDRESS	-05/04/98--01002--008	
CITY-ST-ZIP	AVON PARK FL		6.4 CITY-ST-ZIP	***70.00	

$5 4.30

CR2E037 (10/97)

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE _____ (Secretary) 4/30/98 941-471-5515