

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 705385

FILED
Jan 03, 2012
Secretary of State

Entity Name: BASIL L. KING SCHOLARSHIP FOUNDATION, INC.

Current Principal Place of Business:

403 SOUTH 6TH STREET
FORT PIERCE, FL 34950

New Principal Place of Business:

Current Mailing Address:

403 SOUTH 6TH STREET
FORT PIERCE, FL 34950

New Mailing Address:

FEI Number: 59-0651084

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FEE, FRANK H III,ESQ
426 AVENUE A
FT PIERCE, FL 34950 US

Name and Address of New 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.

SIGNATURE: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: CD
Name: FEE, FRANK H III
Address: 426 AVENUE A
City-St-Zip: FT PIERCE, FL 34950

Title: STD
Name: JOHNSTON, FREDERICK T
Address: 334 SE NARANJA AVENUE
City-St-Zip: PORT ST. LUCIE, FL 34952

Title: D
Name: ABERNETHY, BRUCE
Address: 500 VIRGINIA AVE, SUITE 202
City-St-Zip: FORT PIERCE, FL 34982

Title: ED
Name: HARRIS, CRAIG F
Address: 403 S. 6TH STREET
City-St-Zip: FORT PIERCE, FL 34950

Title: D
Name: BENTON, MARGARET
Address: 800 VIRGINIA AVE #10
City-St-Zip: FORT PIERCE, FL 34982

Title: D
Name: ALLEN, BARBARA
Address: 281 MARINA DRIVE
City-St-Zip: FT. PIERCE, FL 34949

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: CRAIG F HARRIS

ED

01/03/2012

Electronic Signature of Signing Officer or Director

Date