## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT#716676** 

FILED Jan 07, 2009 Secretary of State

Entity Name: JOSEPH PATRICK DEEB MEMORIAL SCHOLARSHIP FUND INC.

Current F	Principal Place of Business:	New Principal Place of Busin	ess:
	LHOUN ST. SSEE, FL 32302	227 S. CALHOUN ST. TALLAHASSEE, FL 32301	
Current N	Mailing Address:	New Mailing Address:	
PO BOX 3 TALLAHA	391 SSEE, FL 32302		
FEI Numbe	r: 23-7028231 FEI Number Applied For ( )	FEI Number Not Applicable ( ) Certifi	cate of Status Desired ( )
Name and	d Address of Current Registered Agent:	Name and Address of New Re	egistered Agent:
227 S CAI	MARGARET B LHOUN SSEE, FL 32302 US	AUSLEY, MARGARET B 227 S CALHOUN TALLAHASSEE, FL 32301 U	JS
	e named entity submits this statement for the	purpose of changing its registered office or	r registered agent, or both,
n the Stat	e of Florida.		
			01/07/2009
		gent	01/07/2009 Date
SIGNATU	RE:	gent ADDITIONS/CHANGES TO OF	Date
SIGNATU	RE:Electronic Signature of Registered Ac	ADDITIONS/CHANGES TO OF	Date
SIGNATU  OFFICER  Title: Name: Address:	RE:  Electronic Signature of Registered Age S AND DIRECTORS:  SD () Delete AUSLEY, MARGARET B 227 S CALHOUN	ADDITIONS/CHANGES TO OF  Title: ( ) Change Name: Address: City-St-Zip:	Date FFICERS AND DIRECTOR
SIGNATU  OFFICER  Fitle: Name: Address: City-St-Zip: Fitle: Name: Address:	RE:  Electronic Signature of Registered Age S AND DIRECTORS:  SD () Delete AUSLEY, MARGARET B 227 S CALHOUN TALLAHASSEE, FL 32301  D () Delete THORNBERRY, MARCIA DEEB 2810 CLINE STREET	ADDITIONS/CHANGES TO OF  Title: ( ) Change Name: Address: City-St-Zip:  Title: ( ) Change Name: Address: City-St-Zip:	Date  FICERS AND DIRECTOR  ( ) Addition

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.

SIGNATURE: MARGARET B. AUSLEY S/D 01/07/2009