FILE NOW: FILING FEE IS \$61.25

NONPROFIT **CORPORATION** ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1997 DOCUMENT #

740225

(8)

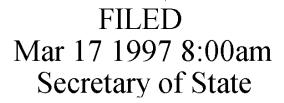
NATIONAL FOUNDATION OF COMMENDED SCHOLARS, INC.

1550 N 13TH AVENUE PENSACOLA FL 32503

Principal Place of Business

Mailing Address

1550 N 13TH AVENUE PENSACOLA FL 32503-5608





3. Date Incorporated or Qualified 3a. Date of Last Report

_								09/23/1977	1	04/17/18	190
2. Principal Place of Business			Mailing Address				4. FEI Number 59-1791602		<u> </u>	oplied For	
							39-179-1002	Not Applicat		ot Applicable	
Suite, Apt. #, etc.			Suite, Apt. #, etc.					5. Certificate of Status Desired		,	Additional equired
City & State			City & State				6. Election Campaign Financing		\$5.00	May Be	
a)			28					Trust Fund Contribution			to Fees
Zip	Country	T-	Zip	Co	untry		Î	8. This corporation has liability for in	tangible t	ax under s	199.032.
4]	25 29			30			\	Florida Statutes Yes W No			
9, Name and Address of Current Registered Agent								10. Name and Address of New Reg	Istered A	gent	-
					81	Name					
HOLSTON, WILLIAM J. 1550 NORTH 13TH AVENUE PENSACOLA FL 32503					82	Chroat As	t Address (P.O. Box Number is Not Acceptable)				
					02	Sireer Address (F.O. box Nomber is Not Acceptable)					
					83						
ILIONO	ODA I E DEDOO										
					84	City			FL	85 Zip	Code
11. Pursuant to	the provisions of Sections 617.0502	and 61	7 1508, Florida Statuti	es, the a	bove	-named c	orpor	ation submits this statement for the pu		changing i	is registered
office or re	gistered agent, or both, in the State of	f Florid	la. Such change was a	authoriza	ed by	the corpo	ration	n's board of directors. I hereby accept	the appo	intment as	registered
agent. I an	n familiar with, and accept the obligati	ions of	, Section 617,0503, Fig	orida Sta	itutes	i.					
SIGNATURE _	Signature, typed or printed name of registered agent	and title i	I population (NOT)	E: Pasietor	od Aoo	et aignetive ee	autend	when reinstating)	DATE		
12.	OFFICERS AND			13	eu Aga	ni signatore is	adunea	ADDITIONS/CHANGES TO OFFICE		DIRECTOR	S IN 12
TITLE			DELETE		TITLE					Change	Addition
NAME	HOLSTON, WILLIAM J				NAME				•		
STREET ADDRESS	1550 NORTH 13TH AVENUE				1.3 STREET ADDRESS						
	PENSACOLA, FL 0										
CITY-ST-ZIP	SD DELETE				1.4 CITY-ST-ZIP 2.1 TITLE					Change	Addition
ľ	_				2.2 NAME					Ollange	L ADDITION
NAME	HOLSTON, WENDY LEE										
STREET ADDRESS	1550 NORTH 13TH AVENUE			•		ADDRESS					
CITY-ST-ZIP	PENSACOLA, FL 0				2.4 CITY - ST - ZIP					A	T and the second
TITLE	ND DEFELE			3.1 TITLE 3.2 NAME					Change	Addition	
NAME	HOLSTON, BEATRICE										
STREET ADDRESS	1550 NORTH 13TH AVENUE			3.3	STREET	ADDRESS					
CITY-ST-ZIP	PENSACOLA, FL 0			_	CITY-S	T - ZIP					
TITLE			☐ DELETE	4.1	TITLE				ļ	∐ Change	Addition
NAME				4. 2	NAME	1					
STREET ADDRESS				4.3 3	STREET	ADDRESS					
CITY-ST-ZIP				4.4	CITY-S	T-ZIP					
TITLE			☐ DELETE	5.1	TITLE				,]	Change	☐ Addition
NAME				5.21	NAME	ļ					
STREET ADDRESS				5.3	STREET	ADDRESS					
CITY-ST-ZIP				5.4	CITY - ST	T- ZIP				_	
TIFLE			☐ DELETE	6.1	IITLE					Change	Addition
NAME (6.21	NAME	ĺ					
STREET ADDRESS				6.3	STREET	ADDRESS					
CITY-ST-ZIP					CITY-SI	1					
14. I do hereb	y certify that the information supplied	with th	is filing does not qualit	y for the	e exe	mption sta	ted ir	Section 119.07(3)(i), Florida Statutes	. I further	certify that	the
Information	indicated on this annual report or sup ficer or director of the corporation or the Block 12 or Block 13 if changed, or c	ppleme ne rece	ental annual report is to eiver or trustee empow	rue and ered to	accu	rate and th	hat m	ly signature shall have the same legal	effect as	if made un	der oath; that

R. A. STOCKA VILLABORATION (ROLLAND)

2/10/09 100 1121/ 22 00