2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 20, 2009
Secretary of State

DOCUMENT# F04000001075

Entity Name: SCORE FOUNDATION, INC.

Current Principal Place of Business:

1175 HERNDON PARKWAY, SUITE 900
HERNDON, VA 20170

New Principal Place of Business:

Current Mailing Address:

1175 HERNDON PARKWAY, SUITE 900
HERNDON, VA 20170

New Mailing Address:

FEI Number: 52-1962712 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 323012525 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:	D	( ) Delete
Name:	YANCEY, W. KENNETH JR.	
Address:	1175 HERNDON PARKWAY, SUITE 900	
City-St-Zip:	HERNDON, VA 20170	
Title:	D	( ) Delete
Name:	MONTESA, NOEL	
Address:	1175 HERNDON PARKWAY	
City-St-Zip:	HERNDON, VA 20170	
Title:	D	( ) Delete
Name:	DOBOSZ, MARK	
Address:	4135 CENTER GATE BLVD.	
City-St-Zip:	SARASOTA, FL 34233	
Title:	D	( ) Delete
Name:	CARDEN, JOHN	
Address:	17497 SCENIC 98	
City-St-Zip:	POINT CLEAR, AL 36564	
Title:	D	( ) Delete
Name:	HARRIS, BERNARD DR.	
Address:	3411 ERIN KNOLL CT	
City-St-Zip:	HOUSTON, TX 11714	
Title:	D	( ) Delete
Name:	MENDEZ, MICHAEL	
Address:	741 CANADA ANCHA	
City-St-Zip:	SANTA FE, NM 87501	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	

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: NOEL MONTESA D 01/20/2009

Electronic Signature of Signing Officer or Director — Date