

**2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Jan 15, 2009**  
**Secretary of State**

DOCUMENT# F96000003986

Entity Name: SCHOLARSHIP AMERICA, INC.

**Current Principal Place of Business:**

ONE SCHOLARSHIP WAY  
SAINT PETER, MN 56082

**New Principal Place of Business:**

**Current Mailing Address:**

ONE SCHOLARSHIP WAY  
SAINT PETER, MN 56082

**New Mailing Address:**

FEI Number: 04-2296967      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

LUTGEN, CAROL  
904 WALKER LOOP  
LADY LAKE, FL 321627489 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: P ( ) Delete  
Name: STANLEY, CLIFFORD  
Address: ONE SCHOLARSHIP WAY  
City-St-Zip: SAINT JAMES, MN 56081

Title: VP ( ) Delete  
Name: LASSERE, DONALD E  
Address: ONE SCHOLARSHIP WAY  
City-St-Zip: ST PETER, MN 56082

Title: ACFO ( ) Delete  
Name: CHENEY, ANNE ACFO  
Address: ONE SCHOLARSHIP WAY  
City-St-Zip: ST PETER, MN 56082

Title: D ( ) Delete  
Name: BILLINGS, SHIRLI  
Address: 11 KESWICK COMMONS  
City-St-Zip: NEW ALBANY, OH 43054

Title: T ( ) Delete  
Name: MCGRATH, PHYLLIS  
Address: 140 WESTPORT TURNPIKE  
City-St-Zip: FAIRFIELD, CT 06430

Title: D ( ) Delete  
Name: SCHWAB, RICHARD  
Address: ONE SCHOLARSHIP WAY  
City-St-Zip: SAINT PETER, MN 56082

**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: D (X) Change ( ) Addition  
Name: SCHRECK, MIM  
Address: ONE SCHOLARSHIP WAY  
City-St-Zip: ST. PETER, MN 56082

Title: T (X) Change ( ) Addition  
Name: MARQUEST, KAY  
Address: ONE SCHOLARSHIP WAY  
City-St-Zip: ST. PETER, MN 56082

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: ANNE CHENEY

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

ACFO

01/15/2009

\_\_\_\_\_  
Date