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FILED
May 21 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **F96000005492 (1)**
1. Corporation Name

NATIONAL HISPANIC SCHOLARSHIP FUND, INC.



Principal Place of Business ONE SANSOME STREET SUITE 1000 SAN FRANCISCO CA 94104	Mailing Address ONE SANSOME STREET SUITE 1000 SAN FRANCISCO CA 94104
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3. Date Incorporated or Qualified 10/22/1996	
4. FEI Number 52-1051044	Applied For ☐ Not Applicable

2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24 Country	2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip 29 Country
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5. Certificate of Status Desired ☒ \$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees
7. Is this nonprofit corporation a homeowners association? ☐ Yes ☒ No
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION FL 33324**

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City
FL 85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS	
TITLE	D C ☐ DELETE
NAME	ALVAREZ, FRANK
STREET ADDRESS	341 FAIRWAY DR.
CITY-ST-ZIP	SANTA ROSA CA 95409
TITLE	VC D ☐ DELETE
NAME	OSTERGARD, PAUL
STREET ADDRESS	850 THIRD AVENUE, 13TH FLOOR
CITY-ST-ZIP	NEW YORK NY 10043
TITLE	D C ☐ DELETE
NAME	TUCKER, SARA M
STREET ADDRESS	560 SPRUCE ST.
CITY-ST-ZIP	SAN FRANCISCO CA 94118
TITLE	D S ☐ DELETE
NAME	RANGEL, JESUS
STREET ADDRESS	37 HILLVALE DR.
CITY-ST-ZIP	CLAYTON MO 63105
TITLE	T D ☒ DELETE
NAME	ROMERO, EDWARD L
STREET ADDRESS	1521 EAGLE RIDGE RD., NE
CITY-ST-ZIP	ALBUQUERQUE NM 87122
TITLE	☐ DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
1.1 TITLE	D ☒ Change ☐ Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	D - C ☒ Change ☐ Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	D - P ☒ Change ☐ Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	D - VC ☒ Change ☐ Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	D - T ☐ Change ☒ Addition
5.2 NAME	Jose Galtan
5.3 STREET ADDRESS	1420 Fifth Avenue, #3500
5.4 CITY-ST-ZIP	Seattle, WA 98101
6.1 TITLE	D - S ☐ Change ☒ Addition
6.2 NAME	Rudy Beserra
6.3 STREET ADDRESS	1155 Newbridge Trace; Atlanta, GA30319
6.4 CITY-ST-ZIP	

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(b), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE

[Signature]

President

5/11/98

115/145 0000

CR2E037 (10/97)