2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED Apr 14, 2005 08:00 AM Secretary of State DOCUMENT # N00000002435 1. Entity Name JOEL EVERS AMERICAN LEGION SCHOLARSHIP FUND, INC. Mailing Aguress Principal Place of Business P. O. BOX 1142 WAUCHULA FL 33873 117 W PALMETTO ST WAUCHULA FL 33873 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 1st MOORE CR2E037 (10/04) Applied For City & State City & State 4. FEI Number 65-1014295 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name BURTON, JOHN W Street Address (P.O. Box Number is Not Acceptable) 106 W. PALMETTO ST. WAUCHULA FL 33873 City Zip Code 8. 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. I am familiar with, and accept the obligations of registered agent DATE Signature, typed or printed name of registered agent and little it applicable (NOTE Registered Agent signature required when teinstaling) 9. Election Campaign Financing FILE NOW: FEE IS \$61.25 Make Check Payable to \$5.00 May Be Trust Fund Contribution Florida Department of State Due By May 1, 2005 Added to Fees ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. OFFICERS AND DIRECTORS 11. Change TITLE Delete तास ह Addition HARRISON, JAMES W NAME NAME U00000305900 2596 LEE SHACKELFORD RD. STREET ADDRESS STREET ADDRESS 04/14/05-88104-822 61.25 WAUCHULA FL 33873 CITY-ST-ZIP CITY - ST - ZIP VD Change ☐ Delete TITLE ☐ Addition 10111 SAUNDERS, CARL NAME NAME 1150 SAUNDERS LANE STREET ADDRESS STREET ADDRESS WAUCHULA FL 33873 CITY - ST - ZIP CITY-ST-ZIP Delete ☐ Change Addition ROBERTS, LAWRENCE A NAME 1269 PINE CT STREET ADDRESS STREET ADDRESS WAUCHULA FL 33873 CITY-ST-ZIP City-St-7IP TITLE ☐ Delete TITLE ☐ Change Addition BURTON, JOHN W NAME 809 W. PAMETTO ST. STREET ADDRESS STREET ADDRESS WAUCHULA FL 33873 CITY-ST-ZIP CITY-ST-ZIP Delete TITLE Change ☐ Addition MELENDY, JERRY H NAME NAME 912 W. MAIN ST. STREET ADDRESS STREET ADDRESS WAUCHULA FE 33873 CITY-ST-ZIP CITY - ST - ZIP ☐ Change Addition TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

04/13/2005 863-773-2331