

**2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED  
Jan 31, 2006  
Secretary of State**

DOCUMENT# N00000004056

Entity Name: THE JULIE ANN KAPPERT SCHOLARSHIP FOUNDATION, INCORPORATED

**Current Principal Place of Business:**

6640 STILL PT. DR.  
MELBOURNE, FL 329402032

**New Principal Place of Business:**

**Current Mailing Address:**

6640 STILL PT. DR.  
MELBOURNE, FL 329402032

**New Mailing Address:**

FEI Number: 22-2848967      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

KAPPERT, CHARLES  
6640 STILL PT. DR.  
MELBOURNE, FL 329402032 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: VP      ( ) Delete  
Name: KAPPERT, JEFFREY C VP  
Address: 381 SUMMERSET DRIVE  
City-St-Zip: SWITZERLAND, FL 32259 US

Title: SEC      ( ) Delete  
Name: KAPPERT, CAROL B SEC  
Address: 6640 STILL POINT DRIVE  
City-St-Zip: MELBOURNE, FL 32940 US

Title: PRES      ( ) Delete  
Name: KAPPERT, CHARLES F PRES  
Address: 6640 STILL POINT DRIVE  
City-St-Zip: MELBOURNE, FL 32940 US

Title: DIR      ( ) Delete  
Name: KAPPERT, CHARLES F DIR  
Address: 6640 STILL POINT DRIVE  
City-St-Zip: MELBOURNE, FL 32940 US

Title: DIR      ( ) Delete  
Name: KAPPERT, JEFFREY C DIR  
Address: 381 SUMMERSET DRIVE  
City-St-Zip: SWITZERLAND, FL 32259 US

Title: DIR      ( ) Delete  
Name: KAPPERT, CAROL B DIR  
Address: 6640 STILL POINT DRIVE  
City-St-Zip: MELBOURNE, FL 32940 US

**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 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: CHARLES F. KAPPERT

DIR

01/31/2006

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

\_\_\_\_\_  
Date