2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000004654

FILED Mar 25, 2005 Secretary of State

Entity Name: FSASE SCHOLARSHIP FOUNDATION, INC.

Current Principal Place of Business:			New Principal Place of Business:		
	DLLEGE AVE SSEE, FL 3230	01			
Current Mailing Address:			New Maili	New Mailing Address:	
	DLLEGE AVE SSEE, FL 3230)1			
El Number	r: 59-3667528	FEI Number Applied For()	FEI Number Not App	Olicable () Certificate of Status Desired ()	
Name and	d Address of C	urrent Registered Agent:	Name and	d Address of New Registered Agent:	
310 W CC	, RONALD A DLLEGE AVE SSEE, FL 3230	01 US			
	e named entity s e of Florida.	submits this statement for the pu	rpose of changing i	its registered office or registered agent, or both,	
SIGNATU					
	Electron	ic Signature of Registered Agen	ıt	Date	
OFFICER	S AND DIREC	TORS:	ADDITION	NS/CHANGES TO OFFICERS AND DIRECTOR	
Fitle: Name: Nddress: City-St-Zip:	D () GILL, SUSAN 120 N AOPKA A INVERNESS, FI		Title: Name: Address: City-St-Zip:	() Change () Addition	
itle: lame: lddress: City-St-Zip:	KIRKMAN, BAR 1417 S ORANG		Title: Name: Address: City-St-Zip:	() Change () Addition	
Fitle: Name: Address: City-St-Zip:	D () LEPORE, THER 301 N OLIVE AV W PALM BEAC	/E, ROOM 105	Title: Name: Address: City-St-Zip:	D (X) Change () Addition DENT, KATHY 101 S. WASHINGTON BLVD. SARASOTA, FL 34236	
Fitle: Name: Address: City-St-Zip:	D () WILLIAMS, ANN 20 N MAIN ST F BROOKSVILLE	RM 165	Title: Name: Address: City-St-Zip:	D (X) Change () Addition CLARK, DEBORAH 315 COURT STREET CLEARWATER, FL 33756	
「itle:	COWLES, BILL 119 KALEY ST.		Title: Name: Address: City-St-Zip:	() Change () Addition	
lame: Address: City-St-Zip:	ORLANDO, FL	52000			

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: BILL COWLES D 03/25/2005