

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000005265

FILED  
Apr 27, 2007  
Secretary of State

Entity Name: PETE ROSIN SCHOLARSHIP FUND, INC.

**Current Principal Place of Business:**

30262 POINCIANA ROAD  
BIG PINE KEY, FL 33043

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 330  
BIG PINE KEY, FL 33043

**New Mailing Address:**

FEI Number: 04-3653123      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

HETTINGER, BARBARA  
29144 CAMAS LANE  
BIG PINE KEY, FL 33043      US

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

DANTONIO, SUSANN  
30262 POINCIANA ROAD  
BIG PINE KEY, FL 33043      US

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: SUSANN DANTONIO      04/27/2007  
\_\_\_\_\_  
Electronic Signature of Registered Agent      Date

**OFFICERS AND DIRECTORS:**

Title: D      ( ) Delete  
Name: D'ANTONIO, ROBERT  
Address: 30262 POINCIANA ROAD  
City-St-Zip: BIG PINE KEY, FL 33043

Title: D      ( ) Delete  
Name: D'ANTONIO, SUSANN  
Address: 30262 POINCIANA ROAD  
City-St-Zip: BIG PINE KEY, FL 33043

Title: D      ( ) Delete  
Name: HETTINGER, BARBARA  
Address: 29144 CAMAS LANE  
City-St-Zip: BIG PINE KEY, FL 33043

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: D      (X) Change ( ) Addition  
Name: UPMAL, GALE  
Address: 27412 ANGUILA  
City-St-Zip: RAMROD KEY, FL 33042

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: SUSANN DANTONIO      D      04/27/2007  
\_\_\_\_\_  
Electronic Signature of Signing Officer or Director      Date