2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 12, 2004
Secretary of State

DOCUMENT# N00000007169

Entity Name: JEAN WEIL SCHOLARSHIP FUND, INC.

Current Principal Place of Business:

775 FENTRESS BLVD.
DAYTONA BEACH, FL 32114

New Principal Place of Business:

Current Mailing Address:

775 FENTRESS BLVD.
DAYTONA BEACH, FL 32114

New Mailing Address:

FEI Number: 59-3678956 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

GATES, JUSTIN
775 FENTRESS BLVD.
DAYTONA BEACH, FL 32114

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: D ( ) Delete
Name: BARNETTE, ROBERT
Address: 241 SHULL AVENUE
City-St-Zip: GAHANNA, OH 43230

Title: D ( ) Delete
Name: BROUSSARD, ALLEN
Address: MARINE CORP JROTC OFF. 9115 FERN CREEK RD
City-St-Zip: FERN CREEK, KY 402912799

Title: D ( ) Delete
Name: FOSTER, CAL
Address: 22 WESTBROOK DRIVE
City-St-Zip: HAMPTON, VA 23666

Title: D ( ) Delete
Name: GATES, JUSTIN
Address: 775 FENTRESS BLVD.
City-St-Zip: DAYTON BEACH, FL 32114

Title: D ( ) Delete
Name: MIKESELL, GREG
Address: 1035 STIRRUP DRIVE
City-St-Zip: SPRING BRANCH, TX 78070

Title: D ( ) Delete
Name: WILLIAM, KEITH
Address: 2364 MOONLIGHT GLEN
City-St-Zip: ESCONDIDO, CA 92026

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 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: JUSTIN L. GATES D 02/12/2004
Electronic Signature of Signing Officer or Director Date