2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00434

FILED Apr 07, 2009 Secretary of State

Entity Name: REGINALD E. JOHNSON MEMORIAL SCHOLARSHIP FUNDS CLUB, INC.

SHACKLEFORD, ERIE 3680 MEADOWLARK WAMELBOURNE, FL 32904 The above named entity sin the State of Florida. SIGNATURE: Electron OFFICERS AND DIRECT Title: VD () Name: BANKS, MARY Address: 704 E. BROTHE City-St-Zip: MELBOURNE, F Title: PD () Name: SHACKLEFORD Address: 3680 MEADOW City-St-Zip: MELBOURNE, F Title: SD () Name: LUCAS, SHARO Address: 475 PORT MALA City-St-Zip: PALM BAY, FL Title: TD () Name: MOBLEY, ENOO Address: 1802 AIRPORT	FEI Number Applied For () Furrent Registered Agent: US ubmits this statement for the purpic Signature of Registered Agent FORS: Delete RS AVE	Name and Name and Dose of changing it ADDITION Title: Name: Address:	Address of New Registered Agent: s registered office or registered agent, or both, Date
PO BOX 3231 MELBOURNE, FL 32902 FEI Number: 59-2397203 Name and Address of C SHACKLEFORD, ERIE 3680 MEADOWLARK WAMELBOURNE, FL 32904 The above named entity sin the State of Florida. SIGNATURE: Electron OFFICERS AND DIRECTION Title: VD () Name: BANKS, MARY Address: 704 E. BROTHE City-St-Zip: MELBOURNE, F Title: PD () Name: SHACKLEFORD Address: 3680 MEADOW City-St-Zip: MELBOURNE, F Title: SD () Name: LUCAS, SHARO Address: 475 PORT MALA City-St-Zip: PALM BAY, FL Title: TD () Name: MOBLEY, ENOO Address: 1802 AIRPORT	FEI Number Applied For () Furrent Registered Agent: US ubmits this statement for the purpic Signature of Registered Agent FORS: Delete RS AVE	Name and Name and Dose of changing it ADDITION Title: Name: Address:	cable () Certificate of Status Desired (X) Address of New Registered Agent: s registered office or registered agent, or both, Date S/CHANGES TO OFFICERS AND DIRECTORS
MELBOURNE, FL 32902 FEI Number: 59-2397203 Name and Address of C SHACKLEFORD, ERIE 3680 MEADOWLARK WAMELBOURNE, FL 32904 The above named entity sin the State of Florida. SIGNATURE: Electron OFFICERS AND DIRECTION Title: VD () Name: BANKS, MARY Address: 704 E. BROTHE City-St-Zip: MELBOURNE, F Title: PD () Name: SHACKLEFORE Address: 3680 MEADOW City-St-Zip: MELBOURNE, F Title: SD () Name: LUCAS, SHARO Address: 475 PORT MALA City-St-Zip: PALM BAY, FL Title: TD () Name: MOBLEY, ENOO Address: 1802 AIRPORT	FEI Number Applied For () Furrent Registered Agent: AY US ubmits this statement for the purplic Signature of Registered Agent FORS: Delete RS AVE	Name and pose of changing it ADDITION Title: Name: Address:	Address of New Registered Agent: s registered office or registered agent, or both, Date S/CHANGES TO OFFICERS AND DIRECTORS
Name and Address of C SHACKLEFORD, ERIE 3680 MEADOWLARK WAMELBOURNE, FL 32904 The above named entity sin the State of Florida. SIGNATURE: Electron OFFICERS AND DIRECTIVE: Title: Name: BANKS, MARY 704 E. BROTHE City-St-Zip: MELBOURNE, F Title: PD () Name: SHACKLEFORD Address: 3680 MEADOW City-St-Zip: MELBOURNE, F Title: SD () Name: LUCAS, SHARO Address: 475 PORT MALA City-St-Zip: PALM BAY, FL Title: TD () Name: MOBLEY, ENOO Address: 1802 AIRPORT	urrent Registered Agent: US ubmits this statement for the purp ic Signature of Registered Agent FORS: Delete RS AVE	Name and pose of changing it ADDITION Title: Name: Address:	Address of New Registered Agent: s registered office or registered agent, or both, Date S/CHANGES TO OFFICERS AND DIRECTORS
SHACKLEFORD, ERIE 3680 MEADOWLARK WAMELBOURNE, FL 32904 The above named entity sin the State of Florida. SIGNATURE: Electron OFFICERS AND DIRECT Title: VD () Name: BANKS, MARY Address: 704 E. BROTHE City-St-Zip: MELBOURNE, F Title: PD () Name: SHACKLEFORD Address: 3680 MEADOW City-St-Zip: MELBOURNE, F Title: SD () Name: LUCAS, SHARO Address: 475 PORT MALA City-St-Zip: PALM BAY, FL Title: TD () Name: MOBLEY, ENOO Address: 1802 AIRPORT	US ubmits this statement for the purp ic Signature of Registered Agent FORS: Delete RS AVE	oose of changing it ADDITION Title: Name: Address:	s registered office or registered agent, or both, Date S/CHANGES TO OFFICERS AND DIRECTORS
3680 MEADOWLARK WAMELBOURNE, FL 32904 The above named entity sin the State of Florida. SIGNATURE: Electron OFFICERS AND DIRECTORY Title: VD () Name: BANKS, MARY Address: 704 E. BROTHE City-St-Zip: MELBOURNE, F Title: PD () Name: SHACKLEFORD Address: 3680 MEADOW City-St-Zip: MELBOURNE, F Title: SD () Name: LUCAS, SHARO Address: 475 PORT MALA City-St-Zip: PALM BAY, FL Title: TD () Name: MOBLEY, ENOO Address: 1802 AIRPORT	US ubmits this statement for the purp ic Signature of Registered Agent FORS: Delete RS AVE	ADDITION Title: Name: Address:	Date S/CHANGES TO OFFICERS AND DIRECTORS
in the State of Florida. SIGNATURE: Electron OFFICERS AND DIRECTITIE: Name: BANKS, MARY Address: 704 E. BROTHE City-St-Zip: MELBOURNE, F Title: PD () Name: SHACKLEFORE Address: 3680 MEADOW City-St-Zip: MELBOURNE, F Title: SD () Name: LUCAS, SHARO Address: 475 PORT MALA City-St-Zip: PALM BAY, FL Title: TD () Name: MOBLEY, ENOO Address: 1802 AIRPORT	ic Signature of Registered Agent FORS: Delete RS AVE	ADDITION Title: Name: Address:	Date S/CHANGES TO OFFICERS AND DIRECTORS
Title: VD () Name: BANKS, MARY Address: 704 E. BROTHE City-St-Zip: MELBOURNE, F Title: PD () Name: SHACKLEFORD Address: 3680 MEADOW City-St-Zip: MELBOURNE, F Title: SD () Name: LUCAS, SHARO Address: 475 PORT MALA City-St-Zip: PALM BAY, FL Title: TD () Name: MOBLEY, ENOO Address: 1802 AIRPORT	FORS: Delete RS AVE	Title: Name: Address:	S/CHANGES TO OFFICERS AND DIRECTORS
OFFICERS AND DIRECTITIE: VD () Name: BANKS, MARY Address: 704 E. BROTHE City-St-Zip: MELBOURNE, F Title: PD () Name: SHACKLEFORE Address: 3680 MEADOW City-St-Zip: MELBOURNE, F Title: SD () Name: LUCAS, SHARO Address: 475 PALM BAY, FL Title: TD () Name: MOBLEY, ENOO Address: 1802 AIRPORT	FORS: Delete RS AVE	Title: Name: Address:	S/CHANGES TO OFFICERS AND DIRECTORS
Title: VD () Name: BANKS, MARY Address: 704 E. BROTHE City-St-Zip: MELBOURNE, F Title: PD () Name: SHACKLEFORE Address: 3680 MEADOW City-St-Zip: MELBOURNE, F Title: SD () Name: LUCAS, SHARO Address: 475 PORT MALA City-St-Zip: PALM BAY, FL Title: TD () Name: MOBLEY, ENOO Address: 1802 AIRPORT	Delete RS AVE	Title: Name: Address:	
Name: BANKS, MARY Address: 704 E. BROTHE City-St-Zip: MELBOURNE, F Title: PD () Name: SHACKLEFORE Address: 3680 MEADOW City-St-Zip: MELBOURNE, F Title: SD () Name: LUCAS, SHARO Address: 475 PORT MALA City-St-Zip: PALM BAY, FL Title: TD () Name: MOBLEY, ENOO Address: 1802 AIRPORT	RS AVE	Name: Address:	() Change () Addition
Name: SHACKLEFORD Address: 3680 MEADOW City-St-Zip: MELBOURNE, F Title: SD () Name: LUCAS, SHARO Address: 475 PORT MALA City-St-Zip: PALM BAY, FL Title: TD () Name: MOBLEY, ENOO Address: 1802 AIRPORT	- ·	City-St-Zip:	
Name: LUCAS, SHARO Address: 475 PORT MALA City-St-Zip: PALM BAY, FL Title: TD () Name: MOBLEY, ENOC Address: 1802 AIRPORT	LARK WAY	Title: Name: Address: City-St-Zip:	() Change () Addition
Name: MOBLEY, ENOO Address: 1802 AIRPORT	ABAR BLVD NE	Title: Name: Address: City-St-Zip:	() Change () Addition
•	BLVD	Title: Name: Address: City-St-Zip:	() Change () Addition
Title: D () Name: PHILLIPS, ELOI Address: 13222 PECAN S City-St-Zip: MELBOURNE, F	STREET	Title: Name: Address: City-St-Zip:	() Change () Addition
Title: D () Name: FINERSON, CAI Address: 1677 DODGE C City-St-Zip: MELBOURNE, F	IRCLE NORTH	Title: Name: Address: City-St-Zip:	D (X) Change () Addition FINERSON, CARL 1671 WHITMAN DRIVE W. MELBOURNE, FL 32904

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: ERIE SHACKLEFORD PD 04/07/2009